

STIC Search Report Biotech-Chem Library

STIC Database Tracking Number: 1139396

To: Ganapathy Krishnan

Location: REM/5C18/5C25

Art Unit: 1623

Friday, February 13, 2004

Case Serial Number: 10/616278

From: Beverly Shears Location: Remsen Bldg.

RM 1A54

Phone: 571-272-2528

beverly.shears@uspto.gov

Search Notes	
·	•
L	



	FILE	'REGI	STRY' ENTERED AT 08:43:20 ON 13 FEB 2004 E HYALURONIC ACID/CN 5
L1		1	S E3 E HEXOSAMINE/CN 5
L2		1	E HEXOSAMINES/CN 5 S E3 E GLUCOSAMINE/CN 5
L3		1	S E3 E "N-ACETYL-D-GLUCOSAMINE"/CN 5
L4		1	S E3 E "N-ACETYL-D-GALACTOSAMINE"/CN 5
L5		1	S E3 E HEXOSE/CN 5
L6		2	S E3
L7		3	E CHONDROITIN SULFATE/CN 5 S E3 OR E5 OR E22
F8			S L2 OR L3 OR L4 OR L5 OR L6 OR L7
	FILE	'HCAP	LUS' ENTERED AT 08:44:52 ON 13 FEB 2004
L1			SEA FILE=REGISTRY ABB=ON PLU=ON "HYALURONIC ACID"/CN
L2			SEA FILE=REGISTRY ABB=ON PLU=ON HEXOSAMINES/CN SEA FILE=REGISTRY ABB=ON PLU=ON GLUCOSAMINE/CN
L3 L4		1	SEA FILE=REGISTRY ABB=ON PLU=ON N-ACETYL-D-GLUCOSAMINE/
			CN
L5			SEA FILE=REGISTRY ABB=ON PLU=ON N-ACETYL-D-GALACTOSAMIN E/CN
L6		2	SEA FILE=REGISTRY ABB=ON PLU=ON HEXOSE/CN
L7		3	SEA FILE=REGISTRY ABB=ON PLU=ON "CHONDROITIN SULFATE"/C N OR "CHONDROITIN SULFATE A"/CN OR "CHONDROITIN SULFATE C"/CN
L8		9	SEA FILE=REGISTRY ABB=ON PLU=ON L2 OR L3 OR L4 OR L5 OR L6 OR L7
L9			SEA FILE=HCAPLUS ABB=ON PLU=ON L1 OR HYALURONIC OR HYALURONAN OR HA(3A)HYALURON?
L10		5226	SEA FILE=HCAPLUS ABB=ON PLU=ON L9 AND (L8 OR HEXOSAMINE OR GLUCOSAMINE OR CHONDROITIN(1W) (SULFATE OR SULPHATE OR SO##) OR N(W) (ACETYL OR AC) (1W) (GLUCOSAMINE OR GALACTOSAMINE OR GALA) OR ACETYLGLUCOSAMINE OR ACETYLGALAC TOSAMINE OR HEXOSE)
L11	•	70	SEA FILE=HCAPLUS ABB=ON PLU=ON L10 AND (LUBRICANT OR LUBRICAT?(3A)AGENT OR MOISTURIZ? OR MOISTURIS? OR NUTRACEUT?)
L12		1	SEA FILE=HCAPLUS ABB=ON PLU=ON L11 AND (OSTEOARTHRIT? OR (OSTEO OR DEGENERAT?)(3A) (ARTHRIT? OR ARTHROSIS) OR OSTEOARTHROSIS OR ANTIOSTEOARTHR? OR DEGENERAT?(3A) (JOINT (W) (DISEAS? OR DISORDER)))
ACCE DOCU TITL INVE	SSION MENT 1 E: NTOR(S NT ASS	NUMBER NUMBER	: 136:374807 Cosmetic or pharmaceutical composition based on lipoic acid and pyruvic acid Gianfranco de Paoli, Ambrosi
	MENT '	TYPE:	Patent Italian

FAMILY ACC. NUM. COUNT: 1 PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE

IT 1299623 B1 20000324 IT 1998-BS10 19980223
PRIORITY APPLN. INFO.: IT 1998-BS10 19980223

AB The invention concerns a composition for cosmetic or pharmaceutical use which contains as active ingredients at least lipoic acid (both reduced form and dehydrolipoic acid) and pyruvic acid, their salts, esters, and amides and stereoisomers. Each may be present in amts. from 0.0001 to 90% weight/weight

IT 3416-24-8, Glucosamine 7512-17-6,

Acetylglucosamine 9004-61-9, Hyaluronic

acid

RL: COS (Cosmetic use); PEP (Physical, engineering or chemical process); PYP (Physical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(cosmetic or pharmaceutical composition based on lipoic acid and pyruvic acid)

(FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, CONFSCI, SCISEARCH, JICST-EPLUS, JAPIO' ENTERED AT 08:49:29 ON 13 FEB 2004)

L13 9 S L12

L14 9 DUP REM L13 (0 DUPLICATES REMOVED)

L14 ANSWER 1 OF 9 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2004053655 EMBASE

TITLE: Use of nutraceuticals and

chondroprotectants in osteoarthritic dogs

and cats.

AUTHOR: Beale B.S.

CORPORATE SOURCE: B.S. Beale, 1111 West Loop South, Houston, TX 77027,

United States. drbeale@gcvs.com

SOURCE: Veterinary Clinics of North America - Small Animal

Practice, (2004) 34/1 (271-289).

Refs: 68

ISSN: 0195-5616 CODEN: VCNAA6

PUBLISHER IDENT.: S 0195-5616(03)00132-3

COUNTRY:

United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 029 Clinical Biochemistry

030 Pharmacology

O31 Arthritis and Rheumatism
O37 Drug Literature Index

LANGUAGE: English

L14 ANSWER 2 OF 9 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER:

2003-877188 [81] WPIDS

DOC. NO. CPI:

C2003-247748

TITLE:

New indol-2-ones useful for treating e.g. inflammatory bowel disease, Crohn's disease, emphysema, acute respiratory distress syndrome,

asthma.

DERWENT CLASS:

B02

INVENTOR(S): BRONK, B S; CROSSON, R M; DEMELLO, K L PATENT ASSIGNEE(S): (PFIZ) PFIZER INC; (PFIZ) PFIZER PROD INC

```
COUNTRY COUNT:
```

100

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG

WO 2003089427 A1 20031030 (200381)* EN 26

RW: AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SK SL TJ TM TN TR TT TZ UA UG US UZ VN YU ZA ZM ZW

US 2003207897 A1 20031106 (200382)

APPLICATION DETAILS:

PATENT NO KIND	APPLICATION	DATE
WO 2003089427 A1 US 2003207897 A1 Provisional	WO 2003-IB1339 US 2002-374372P US 2003-414856	20030410 20020422 20030416

PRIORITY APPLN. INFO: US 2002-374372P 20020422; US 2003-414856 20030416

AN 2003-877188 [81] WPIDS

AB WO2003089427 A UPAB: 20031216

NOVELTY - New Indol-2-one derivatives (I).

DETAILED DESCRIPTION - New Indol-2-one derivatives of formula (I) and their salts.

X and Y = H, halo, -NO2, T, -CF3, 3-8C cycloalkyl, T-O-, T-S-, T-SO-, T-SO2-, T-(C=O)-, 8-10C aryl-(C=O)-, 1-10C heteroaryl-(C=O)-, 1-10C heterocyclyl-(C=O)-, T-NH-(C=O)-, 8-10C aryl-NH-(C=O)- or (T) 2-N-SO2;

T = 1-6C alkyl;

n = 0 - 2;

Q = 6 membered heterocyclic divalent radical of pyran, piperidine, 1,4-dioxane, morpholine, dithiane, thiomorpholine, pyridazine, piperazine, pyridine, pyrimidine, pyrazine, 1,3,5-triazine or 1,3,5-trithiane;

R1 = H, halo or T; and

R2 = T or 3-8C cycloalkyl.

ACTIVITY - Antiinflammatory; Analgesic; Osteopathic; Antiarthritic; Antirheumatic; Antigout; Dermatological; Immunosuppressive; Antipyretic; Virucide; Gynecological; Gastrointestinal-Gen.; Respiratory-Gen.; Antiasthmatic; Nootropic; Neuroprotective; Immunomodulator; Antiallergic; Cytostatic; Antianemic; Antiulcer; Anticoagulant; Vasotropic; Antiarteriosclerotic; Cardiovascular-Gen.; Cardiant; Cerebroprotective; Vulnerary; Anticonvulsant; Antiparkinsonian; Antimigraine; Antidepressant; Ophthalmological; Antipsoriatic; Muscular-Gen.; Antidiabetic; Nephrotropic; Anti-HIV; Antibacterial; Tocolytic; Hemostatic; Antithyroid; Antimalarial; Protozoacide.

MECHANISM OF ACTION - Cyclooxygenase-2 (COX-2) inhibitor. An in vivo inhibitory potency of indol-2-one derivative (A1) against COX-1 and COX-2 activity was evaluated using an ex vivo

procedure on canine whole blood. Three canines were dosed with (A1) (5 mg/kg) orally in 0.5% methylcellulose vehicle and three canines were untreated. The zero-hour blood samples were collected followed by 2 hour post-dose blood sample collection. Test tubes were prepared containing 2 micro 1 either (A) calcium ionophore A23187 giving a 50 micro M final concentration, which stimulated the production of thromboxine B2 (TXB2) for COX-1 activity determination; or of (B) lipopolysaccharide (LPS) giving 10 nu g/ml final concentration, which stimulated the production of prostaglandin E2 (PGE2) for COX-2 activity determination. The sample of blood (500 micro 1) was added to both test tubes, which were then incubated at 37 deg. C for one hour. After incubation, EDTA (10 micro 1) was added, centrifuged at 4 deg. C and percentage inhibition was calculated after the work up. % Inhibition for ${\tt COX-1}$ and COX-2 after 2 hours was 7 and 77 respectively. Thus compounds possessed good COX-2 selectivity.

USE - For treating an inflammatory disease or condition in a mammal including human, feline or canine, or pain associated with the inflammatory condition; for treating osteoarthritis and for joint treatment (claimed). The diseases include and pain associated with surgery or trauma, arthritis (including degenerative joint disease,

spondyloarthropathies, gouty arthritis, systemic lupus erythematosus, juvenile arthritis and rheumatoid arthritis), fever (including rheumatic fever and fever associated with influenza and other viral infections), common cold, dysmenorrhea, menstrual cramps, inflammatory bowel disease, Crohn's disease, emphysema, acute respiratory distress syndrome, asthma, bronchitis, chronic obstructive pulmonary diseases, Alzheimer's disease, organ transplant toxicity, cachexia, allergic reactions, allergic contact hypersensitivity, cancer (such as solid tumor cancer including colon cancer, breast cancer, lung cancer and prostrate cancer; hematopoietic malignancies including leukemias and lymphomas; Hodgkin's disease; aplastic anemia, skin cancer and familial adenomatous polyptosis), tissue ulceration, peptic ulcers, gastritis, regional enteritis, ulcerative colitis, diverticulitis, recurrent gastrointestinal lesion, gastrointestinal bleeding, coagulation, anemia, synovitis, gout, ankylosing spondylitis, restenosis, periodontal disease, epidermolysis bullosa, osteoporosis, loosening of artificial joint implants, atherosclerosis (including atherosclerotic plaque rupture), aortic aneurysm (including abdominal aortic aneurysm and brain aortic aneurysm), periarteritis nodosa, congestive heart failure, myocardial infarction, stroke, cerebral ischemia, head trauma, spinal cord injury, neuralgia, neuro-degenerative disorders (acute and chronic), autoimmune disorders, Huntington's disease, Parkinson's disease, migraine, depression, peripheral neuropathy, pain (including low back and neck pain, headache and toothache), gingivitis, cerebral amyloid angiopathy, nootropic or cognition enhancement, amyotrophic lateral sclerosis, multiple sclerosis, ocular angiogenesis, corneal injury, macular degeneration, conjunctivitis, abnormal wound healing, muscle or joint sprains or strains, tendonitis, skin disorders (such as psoriasis, eczema, scleroderma and dermatitis), myasthenia gravis, polymyositis, myositis, bursitis, burns, diabetes (including types I and II diabetes, diabetic retinopathy, neuropathy and nephropathy), tumor invasion, tumor growth, tumor metastasis, corneal scarring, scleritis, immunodeficiency diseases (such as AIDS in humans and

FLV, FIV in felines), sepsis, premature labor, hypoprothrombinemia, hemophilia, thyroiditis, sarcoidosis, Behcet's syndrome, hypersensitivity, kidney disease, Rickettsial infections (such as Lyme disease, Erlichiosis), Protozoan diseases (such as malaria, giardia, coccidia), reproductive disorders (preferably in livestock) and septic shock (preferably arthritis, fever, common cold, pain and cancer).

ADVANTAGE - The compounds selectively inhibit cyclooxygenase-2. Dwg.0/0

L14 ANSWER 3 OF 9 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER: 2003-598218 [56] WPIDS

DOC. NO. CPI: C2003-162295

TITLE: Modulating release of monosaccharides in humans or

animals by delaying delivery of chondroprotective and chondrosynthesis stimulating agents, useful for

treating osteoarthritis, Crohn's disease

and ulcerative colitis.

DERWENT CLASS: B04 D16

INVENTOR(S): BOUCHER, I; BRUNET, S

PATENT ASSIGNEE(S): (ISMB-N) ISM BIOPOLYMER INC

COUNTRY COUNT: 102

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG

WO 2003054208 A2 20030703 (200356) * EN 26

RW: AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ NL OA PT SD SE SI SK SL SZ TR TZ UG ZM ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ

DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP
KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ

NO NZ OM PH PL PT RO RU SC SD SE SG SK SL TJ TM TN TR TT TZ

UA UG US UZ VC VN YU ZA ZM ZW

APPLICATION DETAILS:

PATENT NO	KIND	API	PLICATION	DATE
WO 200305420	08 A2	WO	2002-CA1917	20021212

PRIORITY APPLN. INFO: US 2001-339339P 20011213

AN 2003-598218 [56] WPIDS

AB W02003054208 A UPAB: 20030903

NOVELTY - Modulating release of monosaccharides in a human or an animal comprising treating a source of polysaccharides to produce oligosaccharides of desired length, administering at least one of the oligomers or its modified form to a human or animal to allow a lasting release of the monosaccharides and obtain a physiological effect, is new.

DETAILED DESCRIPTION - Modulating release of monosaccharides in a human or an animal comprising treating a source of polysaccharides to produce oligomers of saccharides of desired length, administering at least one of the oligomers or its chemically, biochemically or biologically modified form to a human or animal to allow a lasting release of the monosaccharides and obtain a physiological effect, where the lasting release lasts for a period of time proportional to

the length of the oligomers, is new.

INDEPENDENT CLAIMS are also included for the following:

- (1) a composition comprising an oligomer of saccharides modulating the release of monosaccharides having physiological effect selected from chondroregenerative or a chondroprotective effect, a prebiotic effect, a probiotic effect, a food additive effect, a nutraceutical effect, a wounding effect, an immunomodulatory effect, a systemic anti-inflammatory effect, a bacteriostatic effect, an anti-fungic effect or an antioxidant effect, in association with a pharmaceutical or nutraceutical carrier; and
- (2) a prodrug for modulating the in vivo release of a monosaccharide consisting of an oligomer of saccharides units consisting of 2-100 or 2-25 monosaccharides.

ACTIVITY - Osteopathic; Antiarthritic; Antiinflammatory; Antiulcer.

A total of 9 beagle dogs were used to study the pharmacokinetic profile of the present invention. The results showed that administration by intravenous injection of a glucosamine formulation increased the ALP, which is indicative of cartilage or bone formation.

MECHANISM OF ACTION - Glucosamine-Modulator.

USE - The oligomer of saccharides is useful in the manufacture of a medicament capable of modulated lasting release of a monosaccharide for the treatment of systemic inflammation, in particular osteoarthritis (claimed). Other diseases include Crohn's disease and ulcerative colitis. Dwq.0/3

L14 ANSWER 4 OF 9 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

2002076625 EMBASE ACCESSION NUMBER:

Efficacy of chondroprotective agents. TITLE:

Frenkel S.; DiCesare P.E. AUTHOR:

CORPORATE SOURCE: Dr. S. Frenkel, Musculoskeletal Research Center,

Hospital for Joint Diseases, 301 East 17th Street,

New York, NY 10003, United States.

sally.frenkel@excite.com

Current Opinion in Orthopaedics, (2002) 13/1 (9-13). SOURCE:

Refs: 41

ISSN: 1041-9918 CODEN: COORE

COUNTRY: United States

Journal; General Review DOCUMENT TYPE: Orthopedic Surgery FILE SEGMENT: 033 Drug Literature Index 037

Adverse Reactions Titles 038

LANGUAGE: English SUMMARY LANGUAGE: English

Chondroprotective agents are substances capable of preventing, AR delaying, or reversing cartilage lesions due to osteoarthritis. Typically, aspirin and nonsteroidal antiinflammatory drugs (NSAIDs) have been prescribed for pain relief in OA; their use is, however, associated with significant gastrotoxicity, and does not prevent joint deterioration. COX-2 inhibitors, while having fewer side effects, have recently been linked to cardiovascular complications. In the past several years, there have been reports of chondroprotective effects, as well as amelioration of pain, following intraarticular injection of

> Shears 571-272-2528 Searcher :

hyaluronic acid derivatives or oral administration of the so-called nutraceuticals, glucosamine and chondroitin sulfate. Because no mechanism of action for these agents has been demonstrated and sample sizes in many clinical trials have been small, their use remains controversial. This review examines the most recent clinical studies of these therapeutic modalities. .COPYRGT. 2002 Lippincott Williams & Wilkins, Inc.

L14 ANSWER 5 OF 9 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER: 2002-194608 [25]

DOC. NO. CPI: C2002-060094

TITLE: Composition for repairing connective tissues of

animals e.g. in arthroses, osteoarthritis

WPIDS

comprises exogenous hydrolyzed collagen, exogenous

glucosamine and exogenous bioflavanol.

DERWENT CLASS: A96 B04 C06 G03

INVENTOR(S): BATH, T K; LYNCH, N

PATENT ASSIGNEE(S): (BATH-I) BATH T K; (LYNC-I) LYNCH N

COUNTRY COUNT:

PATENT INFORMATION:

PAT	rent	NO	KIND	DATE	WEEK	LA	PG
US	6333	3304	B1	20011225	(200225)*		11

APPLICATION DETAILS:

PA'	rent no	KIND	APPLICATION DATE	
				-
US	6333304	B1	US 1999-295001 1999042	0

PRIORITY APPLN. INFO: US 1999-295001 19990420

AN 2002-194608 [25] WPIDS

AB US 6333304 B UPAB: 20020418

NOVELTY - A composition comprises exogenous hydrolyzed collagen, exogenous glucosamine and exogenous bioflavanol.

ACTIVITY - Antirheumatic; antiarthritic; antiinflammatory.

MECHANISM OF ACTION - Chondrocytes stimulator; free radicals inhibitor.

USE - For repair of connective tissue in aged animals or animals with connective tissue injury such as a horse or other large animal, an adult human, dog or other medium sized animal and a cat or other small animals (claimed); e.g. suffering from arthritis, arthroses, osteoarthritis or traumatic injury.

ADVANTAGE - The composition supplement endogenous collagen stimulates chondrocytes for the production of collagen and cross-linking of collagen fibers with reduction in capillary leakage, inhibits mast cell degranulation, reduces histamine release, inhibits enzymes that break down collagen and elastin, scavengers free radicals and triggers the production of hyaluronic acids (lubricants), chondroitin sulfate (glucosamine glycans for holding and hydrating connective tissue and enzyme inhibition), keratan and proteoglycans (cartilage shock absorbers). The composition provides improved movement in the aged or injured animals in less than 4 weeks from initial ingestion.

Dwg.0/2

L14 ANSWER 6 OF 9 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN

2000:9592 SCISEARCH ACCESSION NUMBER:

THE GENUINE ARTICLE: 267AB

Therapeutic nutraceutical treatments for TITLE:

osteoarthritis and ischaemia Grant G F (Reprint); Gracy R W AUTHOR:

UNIV N TEXAS, CTR HLTH SCI, OFFICE RES & BIOTECHNOL, CORPORATE SOURCE:

ME 1-806, 3500 CAMP BOWIE BLVD, FT WORTH, TX 76107

(Reprint)

COUNTRY OF AUTHOR: USA

SOURCE:

EXPERT OPINION ON THERAPEUTIC PATENTS, (JAN 2000)

Vol. 10, No. 1, pp. 39-48.

Publisher: ASHLEY PUBL LTD, 1ST FL, THE LIBRARY, 1 SHEPHERDS HILL HIGHGATE, LONDON N6 5QJ, ENGLAND.

ISSN: 1354-3776.

DOCUMENT TYPE:

Article; Journal

FILE SEGMENT: LANGUAGE:

LIFE English

REFERENCE COUNT: 72

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

There has been a very large increase in nutraceutical AB innovations, particularly in the US regulatory marketplace. This article reviews the therapeutic potential of a group of nutraceuticals that share common biochemical pathways, and have shown spectacular marketplace success. These are energy metabolites and precursor molecules involved in the metabolic mechanisms of cartilage replacement and cellular energy functions. The commercial nutraceuticals are glucosamine, ribose and their derivatives. These compounds are considered required nutrients for the repair of cartilage and connective

tissues and optimal cellular energy maintenance in active, middle aged individuals. The recent scientific and patent literature in this segment of the nutraceutical marketplace is reviewed.

L14 ANSWER 7 OF 9 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2001019078 EMBASE

Potential uses of velvet antler as TITLE:

nutraceuticals, functional and medical foods

in the West.

Sunwoo H.H.; Sim J.S. AUTHOR:

Dr. J.S. Sim, Food Concept Antler Research Group, CORPORATE SOURCE:

Dept. Agric., Food/Nutritional Sci., University of

Alberta, Edmonton, Alta. T6G 2P5, Canada.

jsim@afns.ualberta.ca

Journal of Nutraceuticals, Functional and Medical SOURCE:

Foods, (2000) 2/3 (5-23). Refs: 38

ISSN: 1089-4179 CODEN: JNFMFK

United States COUNTRY:

Journal; General Review DOCUMENT TYPE: Pharmacology FILE SEGMENT: 030

> 037 Drug Literature Index

Pharmacy 039

LANGUAGE: English SUMMARY LANGUAGE: English

Velvet antlers have been used as Oriental medicine for many AB centuries. Traditional medical reports and clinical observations from the Eastern world convincingly show that velvet antler is biologically active. However, little information is available on chemical and biological efficacy of antler products in the West due to the incomplete understanding of the uses and pharmacological properties of velvet antlers. To make antler products acceptable as nutraceuticals and functional foods in the West, antler research has been conducted to isolate and characterize the chemical and biological properties of velvet antlers. The chemical composition of antler was determined in four sections (tip, upper, middle, and base). Contents of dry matter, collagen, ash, calcium, phosphorus, and magnesium increased (P < 0.05), and those of protein and lipid decreased (P < 0.05) downward from the tip to the base. The concentrations of uronic acid, sulfated glycosaminoglycan (GAG), and sialic acid decreased (P < 0.05) downward. Amino acid and fatty acid contents, expressed as percentage of total protein and lipid, respectively, also varied (P < 0.05) among sections. The yield of chondroitin sulfate (CS) was approximately six fold greater in the cartilaginous (tip and upper) sections than in the bony (middle and base) sections. In addition to CS, the antler sections contained small amounts of keratan sulfate (KS), hyaluronic acid, and dermatan sulfate. Two proteoglycans associated with GAGs were also extracted from the cartilaginous section; a large aggregated proteoglycan with CS and KS and small molecules of decorin. Water soluble extracts rich in GAG stimulated the growth of bovine fibroblast in culture. Feeding antler diet for 54 days showed a significant effect on the growth rate of immunized rats. Diet antler powder resulted in a significant increase of HDL-C/LDL-C ratio (P < 0.05). The result appears to reflect the involvement of unknown factor(s) derived from the antler diet suggesting the importance for the prevention of the risk of coronary heart disease. Hematocrit value and iron content in plasma also significantly increased by feeding antler powder (P < 0.05). Thus, our data suggest that there are significant unknown factor(s) in the antler powder that enhances the biological performance of growing rats.

L14 ANSWER 8 OF 9 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2000033966 EMBASE

TITLE: Conservative management of the osteoarthritic

knee.

AUTHOR: Troum O.M.; Lemoine C.

CORPORATE SOURCE: Dr. O.M. Troum, School of Medicine, University of

Southern California, 2336 Santa Monica Boulevard,

Santa Monica, CA 90404, United States

SOURCE: Current Opinion in Orthopaedics, (2000) 11/1 (3-8).

Refs: 41

ISSN: 1041-9918 CODEN: COORE

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 031 Arthritis and Rheumatism

033 Orthopedic Surgery 037 Drug Literature Index 038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

Osteoarthritis (OA) is the most common type of arthritis AB affecting synovial joints. Recent advances have altered the traditional progression of medical therapy for OA and have supplied new alternatives for the treatment of refractory OA. The new selective cyclooxygenase-2-inhibitory nonsteroidal anti-inflammatory drugs, celecoxib and rofecoxib, have significantly improved safety profiles, particularly with respect to serious gastrointestinal side effects and platelet inhibition. They should be used preferentially in higher-risk patients. Intra-articular viscosupplementation of the knee with exogenous hyaluronic acid has been approved by the US Food and Drug Administration as a medical device for the treatment of OA of the knee. It is reportedly as effective as nonsteroidal anti-inflammatory drugs for moderate OA of the knee. Finally, arthroscopic knee-joint lavage, with or without steroids, is another alternative for the treatment of knee OA; it should be considered before surgery is contemplated. Agents that may prevent cartilage degradation, such as the nutraceuticals (glucosamine sulfate, chondroitin sulfate , and collagen hydrolysate) or inhibitors of nitric oxide or metalloproteinases, may prove beneficial but are still under investigation.

L14 ANSWER 9 OF 9 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS

RESERVED. on STN

ACCESSION NUMBER: 94096368 EMBASE

DOCUMENT NUMBER:

1994096368

TITLE:

Hyaluronic acid. A review of its

pharmacology and use as a surgical aid in

ophthalmology, and its therapeutic potential in joint

disease and wound healing.

AUTHOR:

Goa K.L.; Benfield P.

CORPORATE SOURCE: Adis International Limited, 41 Centorian

Drive, Mairangi Bay, Auckland 10, New Zealand

SOURCE:

Drugs, (1994) 47/3 (536-566). ISSN: 0012-6667 CODEN: DRUGAY

COUNTRY: New Zealand

DOCUMENT TYPE: FILE SEGMENT: Journal; General Review 012 Ophthalmology

030 Pharmacology

031 Arthritis and Rheumatism

033 Orthopedic Surgery 037 Drug Literature Index 038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

AB Hyaluronic acid is a naturally occurring polysaccharide with distinct physicochemical properties which underlie its application as a viscoelastic tool in ophthalmological surgery. In cataract surgery the role of hyaluronic acid in facilitating procedures and protecting the corneal endothelium is well established. Some benefit was also been gained with the use of hyaluronic acid in penetrating keratoplasty trabeculectomy retinal reattachment and trauma surgery although its efficacy in these indications is less well-defined in the published literature. In addition to its lubricating and cushioning properties demonstration of some in vitro anti-inflammatory activity and a possible disease-modifying effect for hyaluronic acid in animals has prompted its investigation as a treatment in

osteoarthritis and to a much lesser extent in rheumatoid arthritis. Hyaluronic acid 20mg as weekly intra-articular injections for 3 to 7 weeks improved knee pain and joint motion in patients with osteoarthritis. Although this occurred to a greater degree than with placebo in most comparisons the effects of hyaluronic acid was similar to those of placebo in the largest trial. In the few available comparisons with other agents hyaluronic acid appeared equivalent to methylprednisolone 40mg (for 3 weeks) and to a single injection of triamcinolone 40mg. Hyaluronic acid was distinguished from other therapies by providing a sustained effect after treatment discontinuation. Together with its very good tolerability profile these properties justify further study of hyaluronic acid in patients with osteoarthritis. Some limited evidence of improvement in patients with rheumatoid arthritis and a possible healing effect of hyaluronic acid on tympanic membrane perforations represent additional areas of interest for future investigation. In summary hvaluronic acid is a well-established adjunct to cataract surgery and may prove to be a promising option in the treatment of patients with osteoarthritis. Its very good tolerability provides further impetus for examination of its potential role in on extended scope of arthritic and ophthalmological indications and in wound healing.

	FILE		LUS' ENTERED AT 08:51:29 ON 13 FEB 2004
L1			SEA FILE=REGISTRY ABB=ON PLU=ON "HYALURONIC ACID"/CN
L2		1	SEA FILE=REGISTRY ABB=ON PLU=ON HEXOSAMINES/CN
L3		1	SEA FILE=REGISTRY ABB=ON PLU=ON GLUCOSAMINE/CN
L4		1	SEA FILE=REGISTRY ABB=ON PLU=ON N-ACETYL-D-GLUCOSAMINE/
			CN
L5		1	SEA FILE=REGISTRY ABB=ON PLU=ON N-ACETYL-D-GALACTOSAMIN
			E/CN
L6		2	SEA FILE=REGISTRY ABB=ON PLU=ON HEXOSE/CN
L7		3	SEA FILE=REGISTRY ABB=ON PLU=ON ."CHONDROITIN SULFATE"/C
			N OR "CHONDROITIN SULFATE A"/CN OR "CHONDROITIN SULFATE
			C"/CN
L8		9	SEA FILE=REGISTRY ABB=ON PLU=ON L2 OR L3 OR L4 OR L5
			OR L6 OR L7
L9		15273	SEA FILE=HCAPLUS ABB=ON PLU=ON L1 OR HYALURONIC OR
			HYALURONAN OR HA(3A)HYALURON?
L15		123	SEA FILE=HCAPLUS ABB=ON PLU=ON L9 AND ((OSTEOARTHRIT?
			OR (OSTEO OR DEGENERAT?) (3A) (ARTHRIT? OR ARTHROSIS) OR
			OSTEOARTHROSIS OR DEGENERAT? (3A) (JOINT (W) (DISEAS? OR
			DISORDER)))(S)(TREAT? OR THERAP? OR PREVENT?) OR
			ANTIOSTEOARTHR?)
L16		24	SEA FILE=HCAPLUS ABB=ON PLU=ON L15 AND (L8 OR HEXOSAMIN
			E OR GLUCOSAMINE OR CHONDROITIN(1W) (SULFATE OR SULPHATE
			OR SO##) OR N(W) (ACETYL OR AC) (1W) (GLUCOSAMINE OR
			GALACTOSAMINE OR GAL) OR ACETYLGLUCOSAMINE OR ACETYLGALAC
			TOSAMINE OR HEXOSE)

L17 24 L16 NOT L12

L17 ANSWER 1 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER: 2003:824333 HCAPLUS

DOCUMENT NUMBER: 139:332195

TITLE: Intra-articular therapy in

osteoarthritis

Uthman, I.; Raynauld, J.-P.; Haraoui, B. AUTHOR(S): Department of Internal Medicine, Faculty of CORPORATE SOURCE: Medicine, American University of Beirut, Beirut, Postgraduate Medical Journal (2003), 79(934), SOURCE: 449-453 CODEN: PGMJAO; ISSN: 0032-5473 BMJ Publishing Group PUBLISHER: DOCUMENT TYPE: Journal; General Review LANGUAGE: English A review. The medical literature was reviewed from 1968-2002 using AB Medline and the key words "intra-articular" and " osteoarthritis" to determine the various intro-articular therapies used in the treatment of osteoarthritis. Corticosteroids and hyaluronic acid are the most frequently used intro-articular therapies in osteoarthritis. Other intra-articular substances such as orgotein, radiation synovectomy, dextrose prolotherapy, silicone, saline lavage, saline injection without lavage, analgesic agents, non-steroidal anti-inflammatory drugs, glucosamine, somatostatin, sodium pentosan polysulfate, chloroquine, mucopolysaccharide polysulfuric acid ester, lactic acid solution, and thiotepa cytostatica have been investigated as potentially therapeutic in the treatment of arthritic joints. Despite the lack of strong, convincing, and reproducible evidence that any of the intro-articular therapies significantly alters the progression of osteoarthritis, corticosteroids and hyaluronic acid are widely used in patients who have failed other therapeutic modalities for lack of efficacy or toxicity. As a practical approach for a knee with effusion, steroid injections should be considered while the presence of symptomatic "dry" knees may favor the hyaluronic acid approach. The virtual absence of serious side effects, coupled with the perceived benefits, make these approaches attractive. TT 9004-61-9, Hyaluronic acid RL: ADV (Adverse effect, including toxicity); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses) (efficacy of intra-articular corticosteroids and hyaluronic acid in treatment of osteoarthritis) REFERENCE COUNT: 78 THERE ARE 78 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT HCAPLUS COPYRIGHT 2004 ACS on STN L17 ANSWER 2 OF 24 2003:551532 HCAPLUS ACCESSION NUMBER: DOCUMENT NUMBER: 139:99863 Glycans involved in the transmigration of TITLE: leukocytes across the endothelium Freeze, Hudson; Srikrishna, Geetha; Varki, Ajit; INVENTOR(S): Varki, Nissi The Regents of the University of California, PATENT ASSIGNEE(S): USA; The Burnham Institute SOURCE: PCT Int. Appl., 180 pp.

Searcher: Shears 571-272-2528

CODEN: PIXXD2

Patent

English

DOCUMENT TYPE:

LANGUAGE:

FAMILY ACC. NUM. COUNT: 1 PATENT INFORMATION:

```
APPLICATION NO.
                                                                                            DATE
       PATENT NO.
                                 KIND DATE
                                                                  _____
                                                              WO 2002-US41588 20021227
       WO 2003057715
                                A2
                                           20030717
             W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZM, ZW, AM, AZ, NX, CC, XZ, MD, BU, TT, TM,
                    BY, KG, KZ, MD, RU, TJ, TM
             RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN,
                    GQ, GW, ML, MR, NE, SN, TD, TG
                                                              US 2001-346405P P 20011228
PRIORITY APPLN. INFO.:
       The authors disclose the identification of glycans involved in the
       inflammatory response. In particular, the present invention
       provides novel antibodies directed against novel glycans that are
       enriched on endothelial cell surfaces. The authors also disclose
       methods and compns. suitable to mediate the inflammatory response in
       various settings, as well as methods and compns. for the
       identification of other inflammatory response mediators.
       9004-61-9D, Hyaluronic acid, glycosaminoglycans-
IT
       containing 9007-28-7D, Chondroitin sulfate
        , glycosaminoglycans-containing
       RL: BSU (Biological study, unclassified); BIOL (Biological study)
            (antibodies to carboxylated glycans without reactivity for)
L17 ANSWER 3 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER:
                                      2003:511513 HCAPLUS
DOCUMENT NUMBER:
                                      139:63367
                                      Oligomer-based method of modulating the release
TITLE:
                                      of saccharides, and therapeutic uses thereof
                                      Boucher, Isabelle; Brunet, Serge
INVENTOR(S):
                                      ISM Biopolymer Inc., Can.
PATENT ASSIGNEE(S):
SOURCE:
                                      PCT Int. Appl., 26 pp.
                                      CODEN: PIXXD2
DOCUMENT TYPE:
                                      Patent
LANGUAGE:
                                      English
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
       PATENT NO.
                                 KIND DATE
                                                                 APPLICATION NO.
                                                                                            DATE
       WO 2003054208
                                                                 WO 2002-CA1917
                                  A2
                                           20030703
                                                                                            20021212
                                 A3
       WO 2003054208
                                           20031009

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU
```

BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU,

```
MC, NL, PT, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN,
             GQ, GW, ML, MR, NE, SN, TD, TG
                                          US 2001-339339P P 20011213
PRIORITY APPLN. INFO.:
     The invention provides a method for the controlled release of
     saccharides and oligosaccharides in humans and animals.
     Polysaccharides are digested in a manner to provide oligomers having
     desired nos. of units of saccharides or monosaccharides, most
     particularly glucosamine and N-acetylglucosamine
     and derivs. thereof. The rate of release of monosaccharides is
     proportional to the length of the oligomers administered to an
     organism, and has targeted physiol. effects depending on the length
     of the oligomers used. The methodol. and compns. of the invention
     are useful for the delayed delivery of chondroprotective,
     chondrosynthesis-stimulating agents.
     1811-31-0, N-Acetylgalactosamine
     1811-31-0D, N-Acetylgalactosamine, derivs.
     3416-24-8, Glucosamine 3416-24-8D,
     Glucosamine, derivs. 7512-17-6, N-
     Acetylglucosamine 7512-17-6D, N-
     Acetylglucosamine, derivs.
     RL: PAC (Pharmacological activity); PKT (Pharmacokinetics); THU
     (Therapeutic use); BIOL (Biological study); USES (Uses)
        (oligomer-based method of modulating saccharide release, and
        therapeutic use)
IT
     9004-61-9, Hyaluronan 9004-61-9D,
     Hyaluronan, derivs.
     RL: RCT (Reactant); RACT (Reactant or reagent)
        (oligomer-based method of modulating saccharide release, and
        therapeutic use)
L17 ANSWER 4 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN
                          2003:396729 HCAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                          138:390973
                          Mixture of sodium hyaluronate and
TITLE:
                          chondroitin sulfate for the
                          treatment of osteoarthritis.
INVENTOR(S):
                          Hermida Ochoa, Elias Humberto
PATENT ASSIGNEE(S):
                          Mex.
                          PCT Int. Appl., 43 pp.
SOURCE:
                          CODEN: PIXXD2
DOCUMENT TYPE:
                          Patent
                          English
LANGUAGE:
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
                       KIND DATE
                                            APPLICATION NO.
                                                               DATE
     PATENT NO.
                             _____
                                            WO 2002-EP12703 20021113
                      A1
                             20030522
     WO 2003041724
         W: AE, AG, AL, AU, AZ, BA, MA, MD, MG, MK, MX, NO, NZ, PL, PT,
         SD, SE, UZ, VN, YU, ZA, MD, RU, TJ, TM
RW: GH, GM, KE, LS, MW, SD, SL, SZ, TD, UG, ZM, BG, CH, CY, CZ, DK, EE, ES, FI, FR, GB, GR, IE, LU, MC, PT, SE, TR, BF, CG,
             CI, GN, ML, MR, NE, SN, TD, TG
PRIORITY APPLN. INFO.:
                                          MX 2001-11542
                                                               20011113
                                                            A 20020222
                                          US 2002-82743
     The composition formed by Na hyaluronate and Na chondroitin
AB
     sulfate is used for the treatment of chondral
```

Searcher: Shears 571-272-2528

lesions in osteoarthritis and regeneration of articular

```
cartilage, tested by injection to knee and hip joints.
     9004-61-9, Hyaluronic acid 9007-28-7,
ΙT
     Chondroitin sulfate
     RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
        (injection viscoelastic solution of sodium hyaluronate and
        chondroitin sulfate for treatment of
        osteoarthritis in joints)
                               THERE ARE 5 CITED REFERENCES AVAILABLE FOR
                         5
REFERENCE COUNT:
                               THIS RECORD. ALL CITATIONS AVAILABLE IN
                               THE RE FORMAT
L17 ANSWER 5 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN
                         2003:355603 HCAPLUS
ACCESSION NUMBER:
                         138:348755
DOCUMENT NUMBER:
TITLE:
                         Chondroitin sulfate
                         containing viscoelastics for use in treating
                         ioints
                         Jafari, Masoud R.
INVENTOR(S):
PATENT ASSIGNEE(S):
                         USA
                         U.S. Pat. Appl. Publ., 9 pp., Cont.-in-part of
SOURCE:
                         U.S. Ser. No. 857,543.
                         CODEN: USXXCO
                         Patent
DOCUMENT TYPE:
                         English
LANGUAGE:
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
                                          APPLICATION NO.
                                                            DATE
                      KIND DATE
     PATENT NO.
                                           _____
                      ____
                           -----
                            20030508
                                           US 2002-293094
                                                            20021113
                      A1
     US 2003086899
                                           WO 2001-US8064
                                                            20010314
                            20010920
     WO 2001068079
                      A2
                            20020725
                      А3
     WO 2001068079
         W: AU, BR, CA, CN, JP, MX, PL, US, ZA
         RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC,
             NL, PT, SE, TR
                       A1
                                           US 2001-857543
                                                            20010606
                            20021114
     US 2002169142
     US 6632423
                            20031014
                       B2
                                        US 2000-189179P P
                                                            20000314
PRIORITY APPLN. INFO.:
                                        WO 2001-US8064
                                                         W
                                                            20010314
                                        US 2001-857543
                                                         A2 20010606
     Disclosed are viscoelastic compns. and methods of their use in
AB
     treating joints, especially in conjunction with trauma and
     osteoarthritis. An otic viscoelastic formulation containing 1.6
    .% HMW hyaluronic acid and 4 % chondroitin
     sulfate in Viscoat Buffer was found to be superior in terms
     of retention and duration in the middle ear of Mongolian gerbils.
     9004-61-9, Hyaluronic acid 9007-28-7,
TΤ
     Chondroitin sulfate
     RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL
     (Biological study); USES (Uses)
        (chondroitin sulfate-containing viscoelastics for
        use in treating joints)
L17 ANSWER 6 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN
                         2003:202468 HCAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                         138:215357
                         Use of annellated pyrrole compounds in the
TITLE:
                         treatment of articular cartilage or subchondral
```

bone degeneration

Pelletier, Jean-Pierre; Martel-Pelletier, INVENTOR(S):

Johanne

Merckle G.m.b.H., Germany; Ascentia Pharma Inc. PATENT ASSIGNEE(S):

PCT Int. Appl., 64 pp. SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE:

Patent English

LANGUAGE:

GI

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT	NO.	KI	ND	DATE			A.	PPLI	CATI	ON NC	ο.	DATE		
							_							
WO 2003	020267	А	1	2003	0313		W	20	02-E	P965	8	20020	0829	
W:	AE, AG,	AL,	AM,	AT,	ΑU,	ΑZ,	BA,	BB,	BG,	BR,	BY,	ΒZ,	CA,	CH,
	CN, CO,													
	GE, GH,													
	LC, LK,													
	NO, NZ,													
	TM, TN,	TR,	TT,	ΤZ,	UA,	UG,	US,	UZ,	VC,	VN,	YU,	ZA,	ZM,	ZW,
	AM, AZ,	BY,	KG,	ΚZ,	MD,	RU,	TJ,	TM						
RW:	GH, GM,													
	BG, CH,													
	MC, NL,	PT,	SE,	SK,	TR,	BF,	ВJ,	CF,	CG,	CI,	CM,	GA,	GN,	GQ,
	GW, ML,	MR,	ΝE,	SN,	TD,									
PRIORITY APP	LN. INFO	· :										2001		
						1	US 2	001-	3157	73P	P	2001	0830	
OTHER SOURCE	(S):		MAR	PAT	138:	2153	57							

Me Me COOH Ι

Treating or preventing degeneration or destruction of articular AB cartilage and/or subchondral bone in the affected joint of a mammal is accomplished by administering an annellated pyrrole compound (Markush included). A preferred compound is I (ML3000). The treatment ameliorates, diminishes, actively treats, reverses, or prevents any injury, damage, or loss of articular cartilage or subchondral bone subsequent to the early stage of the degeneration.

3416-24-8, Glucosamine 9004-61-9, ΙT

Hyaluronic acid 9007-28-7, Chondroitin

sulfate

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(annellated pyrrole compds. for treatment of articular cartilage or subchondral bone degeneration, and use with other agents)

```
THERE ARE 9 CITED REFERENCES AVAILABLE FOR
                         9
REFERENCE COUNT:
                               THIS RECORD. ALL CITATIONS AVAILABLE IN
                               THE RE FORMAT
                    HCAPLUS COPYRIGHT 2004 ACS on STN
L17 ANSWER 7 OF 24
                         2003:154262 HCAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                         138:198610
                         Compositions for the treatment and prevention of
TITLE:
                         pain and inflammation with a cyclooxygenase-2
                         selective inhibitor and chondroitin
                         sulfate
                         Pulaski, Steven P.; Kundel, Susan
INVENTOR(S):
                         Pharmacia Corporation, USA
PATENT ASSIGNEE(S):
                         PCT Int. Appl., 148 pp.
SOURCE:
                         CODEN: PIXXD2
DOCUMENT TYPE:
                         Patent
                         English
LANGUAGE:
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
                                           APPLICATION NO. DATE
                    KIND DATE
     PATENT NO.
     WO 2003015799 A1 20030227 WO 2002-US25673 20020813
            AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH,
             CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD,
             GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ,
             LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ,
             NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ,
             TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZM, ZW, AM,
             AZ, BY, KG, KZ, MD, RU, TJ, TM
         RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE,
             BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU,
             MC, NL, PT, SE, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ,
             GW, ML, MR, NE, SN, TD, TG
                                           US 2002-215539
                     A1 20030619
                                                             20020809
     US 2003114416
                                        US 2001-312211P P 20010814
US 2002-215539 A 20020809
PRIORITY APPLN. INFO.:
                         MARPAT 138:198610
OTHER SOURCE(S):
     A method of treating, preventing, or inhibiting pain, inflammation,
     or inflammation-associated disorder in a subject in need of such
     treatment or prevention includes treating the subject with
     chondroitin sulfate and a cyclooxygenase-2
     selective inhibitor, or a prodrug thereof, wherein the amount of
     chondroitin sulfate and the amount of a
     cyclooxygenase-2 selective inhibitor or a pharmaceutically
     acceptable salt or prodrug thereof together constitute a pain- or
     inflammation-suppressing treatment or prevention effective amount
     Glucosamine can optionally be present. Compns. that contain
     the combination of chondroitin sulfate and
     cyclooxygenase-2 selective inhibitor and, optionally, the
     glucosamine, are disclosed, as are pharmaceutical compns.
IT
     7512-17-6, N-Acetyl-D-
     glucosamine 9004-61-9D, Hyaluronic acid,
     glucosamine-containing 9007-28-7, Chondroitin
     sulfate
     RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL
```

Searcher: Shears 571-272-2528

(Biological study); USES (Uses)

(cyclooxygenase 2 inhibitor and chondroitin

sulfate for treatment and prevention of pain and
inflammation)

IT 3416-24-8, Glucosamine 3416-24-8D,

Glucosamine, acid salts

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL

(Biological study); USES (Uses)

(cyclooxygenase 2 inhibitor and chondroitin

sulfate for treatment and prevention of pain and

inflammation, and use with glucosamine)

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR

THIS RECORD. ALL CITATIONS AVAILABLE IN

THE RE FORMAT

L17 ANSWER 8 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER:

2003:23523 HCAPLUS

DOCUMENT NUMBER:

138:66681

TITLE:

Thiazolium as cross-link reversing agents for

collagenous proteins

INVENTOR(S):

Sander, Tom; Donda, Russell S.

PATENT ASSIGNEE(S):

USA

SOURCE:

U.S. Pat. Appl. Publ., 7 pp.

CODEN: USXXCO

DOCUMENT TYPE:

LANGUAGE:

Patent English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE

US 2003008817 A1 20030109 US 2001-898913 20010703

ORITY APPLN. INFO.: US 2001-898913 20010703

US 2001-898913 PRIORITY APPLN. INFO.: The present invention generally relates to compns. and methods for restoring normal mech. properties to collagenous tissue damaged as a result of the natural aging process in mammals. Accordingly, compns. are disclosed which comprises one or more thiazolium based agents capable of inhibiting and reversing non-enzymic crosslinking of collagenous proteins, combined with one or more viscosupplement agents useful in replenishing structural and support material of a tissue or joint, which have been destroyed or damaged over time. The method comprises contacting the target tissue or joint capsule with the composition Administration of the disclosed compds. can stop the progression of, or completely cure degenerative joint diseases. For example, a combined treatment with 1 mg/kg of thiazolium salt and 16 mg of Synvisc was effective in treating damaged tissue and restoring normal function to a knee joint in patients with knee osteoarthritis.

IT 9004-61-9, Hyaluronic acid 9007-28-7,

Chondroitin sulfate

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (combination with; thiazolium in treatment of joint degeneration by inhibiting and revering crosslinking of collagenous proteins)

L17 ANSWER 9 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER:

2003:9699 HCAPLUS

DOCUMENT NUMBER:

139:143552

TITLE:

Effects of intra-articular injection of

hyaluronan on papain-induced
hydrarthrosis of knee in rabbits

Matsuzaka, Satoshi; Miyauchi, Satoshi; Horie, AUTHOR(S): Katsuyuki Medical Research Pharmacology, Tokyo Research CORPORATE SOURCE: Institute, Seikagaku Corporation, Higashi-yamatoshi, Tokyo, Japan Hyaluronan, [Proceedings of the International SOURCE: Cellucon Conference], 12th, Wrexham, United Kingdom, 2000 (2002), Meeting Date 2000, Volume 2, 363-368. Editor(s): Kennedy, John F. Woodhead Publishing Ltd.: Cambridge, UK. CODEN: 69DKVZ; ISBN: 1-85573-570-9 Conference DOCUMENT TYPE: English LANGUAGE: Intra-articular injection of sodium hyaluronan (Na-AB HA) is widely applied in the treatment of osteoarthritis. Na-HA reduces hydrarthrosis accompanied with improvement of synovitis. However, the mol. weight dependence or the mechanism of the effect of Na-HA on the hydrarthrosis is unclear. The objective of the present study is to investigate an effect of various mol. wts. of Na-HA on an exptl. acute hydrarthrosis of knee in rabbits. Highly purified Na-HA prepns. driven from chicken combs, their average mol. weight 30+104 (30Na-HA group), 84+104 (84Na-HA group) and 190+104 (190Na-HA group), were used. The exptl. acute hydrarthrosis was induced by intra-articular injection of papain at 1.5mg/150 µL/joint. On the next day, Na-HA was injected one time intra-articularly at a dose of 1.5mg/150 $\mu L/joint$. Animals were sacrificed on the seventh day after the intra-articular injection of Na-HA. Synovial fluid volume (SFV), total protein (TP), hyaluronan (HA) and chondroitin 4-sulfate (C4S) in the synovial fluids were determined SFV (p<0.01), levels of TP (p<0.05) and C4S (p<0.05) in the synovial fluids were significantly decreased in the 30Na-HA and 84Na-HA groups. However, no effect was observed for all parameters in the 190Na-HA group. These results suggest that Na-HA directly acts on the inflamed synovium. Addnl., an optimal mol. weight of Na-HA will have effect on the exptl. hydrarthrosis. 24967-93-9, Chondroitin 4-sulfate IT RL: BSU (Biological study, unclassified); BIOL (Biological study) (response; effects of intra-articular injection of hyaluronan on papain-induced hydrarthrosis of knee in rabbits) THERE ARE 12 CITED REFERENCES AVAILABLE REFERENCE COUNT: 12 FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT HCAPLUS COPYRIGHT 2004 ACS on STN L17 ANSWER 10 OF 24 2003:5721 HCAPLUS ACCESSION NUMBER: DOCUMENT NUMBER: 138:61345 Liposomal encapsulation of glycosaminoglycans TITLE: for the treatment of arthritic joints INVENTOR(S): Thompson, Jonathan; Niemiec, Susan PATENT ASSIGNEE(S): Depuy, UK SOURCE: PCT Int. Appl., 28 pp. CODEN: PIXXD2 DOCUMENT TYPE: Patent LANGUAGE: English

Searcher: Shears 571-272-2528

FAMILY ACC. NUM. COUNT: PATENT INFORMATION:

```
APPLICATION NO.
                                                                      DATE
     PATENT NO.
                         KIND DATE
                         ----
                                _____
     WO 2003000190
                                                  WO 2002-US19716
                                                                      20020620
                          A2
                                20030103
     WO 2003000190
                         A3
                                20030306
              AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH,
          W:
              CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ,
               NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZM, ZW, AM,
               AZ, BY, KG, KZ, MD, RU, TJ, TM
          RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT,
               SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE,
               SN, TD, TG
                                              US 2001-300750P P
PRIORITY APPLN. INFO.:
                                              US 2002-386791P P 20020607 ·
     Liposome-encapsulated glycosaminoglycans, such as hyaluronic
AB
     acid, chondroitin sulfate, keratin sulfate,
     heparin, and dermatan sulfate, for intra-articular administration
     and treatment of osteoarthritis is described.
     For example, hyaluronic acid was incorporated into DPPC
     liposomes using a film hydration method. He final liposomal concentration
     was 50 mg/mL DPPC and 10 mg/mL hyaluronic acid.
     9004-61-9, Hyaluronic acid 9007-28-7,
IT
     Chondroitin sulfate
     RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
         (liposomal encapsulation of glycosaminoglycans for
         treatment of osteoarthritis)
L17 ANSWER 11 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN
                             2003:4784 HCAPLUS
ACCESSION NUMBER:
DOCUMENT NUMBER:
                             138:61269
                             A complex comprising OCIF and polysaccharide
TITLE:
                             Yamamoto, Shinichi; Okada, Junichi; Kurihara,
INVENTOR(S):
                             Atsushi; Numazawa, Taku; Kondo, Junichi; Tsuda, Eisuke; Mochizuki, Shinichi; Nishi, Hirotaka;
                             Miyazaki, Hideki
                             Sankyo Company Limited, Japan
PATENT ASSIGNEE(S):
                             Eur. Pat. Appl., 31 pp.
SOURCE:
                             CODEN: EPXXDW
DOCUMENT TYPE:
                             Patent
                             English
LANGUAGE:
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
                                                  APPLICATION NO.
                                                                      DATE
     PATENT NO.
                         KIND
                                DATE
                                                 EP 2002-254497
     EP 1270015
                                                                      20020626
                         A2
                                20030102
          R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR
                                                  US 2002-183091
                                                                      20020627
     US 2003045456
                          A1
                                 20030306
                                                                      20020627
      ZA 2002005164
                           Α
                                 20030324
                                                  ZA 2002-5164
                                                  NO 2002-3144
                                                                      20020628
     NO 2002003144
                           Α
                                 20021230
                           A2
                                 20030603
                                                  JP 2002-190407
                                                                      20020628
      JP 2003160601
                                                                      20020628
                           Α
                                 20030610
                                                  BR 2002-2439
      BR 2002002439
                                                  SG 2002-3944
                                                                      20020628
      SG 98059
                           A1
                                 20030820
```

CN 1442201 A 20030917 CN 2002-155849 20020629 US 2003139325 A1 20030724 US 2003-364045 20030211 PRIORITY APPLN. INFO.: JP 2001-198985 A 20010629 US 2002-183091 A1 20020627

AB A novel complex comprising at least one substance selected from the group consisting of osteoclastogenesis-inhibitory factor (OCIF), analogs thereof, and variants thereof, which is bound to at least one substance selected from the group consisting of polysaccharides and derivs. thereof shows prolonged retention in the bloodstream after administration making it useful in the treatment and prophylaxis of bone metabolic diseases.

IT 9004-61-9, Hyaluronic acid 9007-28-7,

Chondroitin sulfate

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (complex comprising OCIF and polysaccharide for treatment of bone metabolic diseases)

L17 ANSWER 12 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER: 2002:876095 HCAPLUS

DOCUMENT NUMBER: 139:73863

TITLE: Various interactions of drugs with cross-linked

hyaluronate gel

AUTHOR(S): Yomota, Chikako; Okada, Satoshi

CORPORATE SOURCE: National Institute of Health Sciences Osaka,

Osaka, 540-0006, Japan

SOURCE: ACS Symposium Series (2003), 833(Polymer Gels),

326-338

CODEN: ACSMC8; ISSN: 0097-6156

PUBLISHER: American Chemical Society

DOCUMENT TYPE: Journal LANGUAGE: English

Hyaluronate (HA) is a biopolymer composed of AΒ repeating disaccharide subunits of N-acetyl-Dglucosamine and D-glucuronate. HA is extensively distributed in connective tissue, synovial fluid of joints and in vitreous humor of the eye. It has been extensively used as a therapeutic agent in osteoarthritis and ophthalmic surgery. Thus hyaluronate is one of the natural polymers successfully applicable to the biomedical use. The basic properties of crosslinked HA gel have been reported(1) and there are several reports of applying the HA gel to medical devices (2,3). However it is reported that due to the high swelling, the ability of the HA gel to retain other substances is not strong enough to use as a pharmaceutical reservoir(2). Previously we noted the reports that some anionic polymer gels bind cationic surfactants(4,5). We have already reported that dodecyltrimethylammonium bromide(DOTMA) binds HA in solution cooperatively and that the binding constant is much smaller than those of other anionic polysaccharides such as chondroitin sulfate(6). Furthermore the crosslinked HA gel was observed to shrink with time in addition of DOTMA, and the weight of the gel decreased by only 2-4% of the initial weight(7). On the other hand, it is well known that many kinds of drugs have properties of surfactants, and self association (micelle) in aqueous solution

have been investigated(8-13). Therefore as cationic surfactants, some drugs were expected to cause the shrinking of the HA gel. The interactions of the crosslinked HA gel with several kinds of cationic drugs were investigated, and the release of incorporated

substances was measured.

IT 9004-61-9, Hyaluronic acid

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological

study); USES (Uses)

(interactions of drugs with cross-linked hyaluronate gel)

REFERENCE COUNT: 18 THERE ARE 18 CITED REFERENCES AVAILABLE

FOR THIS RECORD. ALL CITATIONS AVAILABLE

IN THE RE FORMAT

L17 ANSWER 13 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER:

2002:737518 HCAPLUS

DOCUMENT NUMBER:

138:378314

TITLE:

Oral and intra-articular remedies: Review of

papers published from March 2001 to February

2002

AUTHOR(S):

Jubb, Ronald W.

CORPORATE SOURCE:

Selly Oak Hosp., Univ. Birmingham, Birmingham,

ПK

SOURCE:

Current Opinion in Rheumatology (2002), 14(5),

597-602

CODEN: CORHES; ISSN: 1040-8711 Lippincott Williams & Wilkins

PUBLISHER: DOCUMENT TYPE:

Journal; General Review

LANGUAGE:

English

AB A review. There have been considerable advances in the drug treatments used to treat osteoarthritis.

The development of selective cyclooxygenase inhibitors (COX-II) and confirmation of their efficacy and gastrointestinal safety will reduce treatment morbidity in the elderly. Guidelines for safe and appropriate use of COX-II drugs are now available. The role of antiinflammatory drugs in precipitating cardiorenal events has been highlighted but remains to be fully evaluated. Glucosamine, diacerein, and hyaluronan may all be disease-modifying

drugs for osteoarthritis but confirmatory studies are still needed.

IT 3416-24-8, Glucosamine 9004-61-9,

Hyaluronan

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(oral and intra-articular remedies for treatment of
 osteoarthritis)

REFERENCE COUNT:

THERE ARE 45 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L17 ANSWER 14 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER:

2002:429542 HCAPLUS

DOCUMENT NUMBER:

137:11003

TITLE:

Chondroprotective/restorative compositions

containing hyaluronic acid

INVENTOR(S):

Pierce, Scott W.

PATENT ASSIGNEE(S):

USA

SOURCE:

U.S. Pat. Appl. Publ., 14 pp.

CODEN: USXXCO

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

THIS PAGE BLANK (USPTO)

APPLICATION NO. DATE KIND DATE PATENT NO. _____ -----US 2002068718 A1 20020606 US 2001-967977 20011002 US 2000-237838P P 20001003 PRIORITY APPLN. INFO.: An oral composition based on hyaluronic acid or its salts and optionally a therapeutic drug is provided for treating or preventing osteoarthritis, joint effusion, joint inflammation and pain, synovitis, lameness, post-operative arthroscopic surgery, deterioration of proper joint function including joint mobility, the reduction or inhibition of metabolic activity of chondrocytes, the activity of enzymes that degrade cartilage, and the reduction or inhibition of the production of hyaluronic acid in a mammal. Addnl., compns. containing hyaluronic acid, chondroitin sulfate and glucosamine sulfate in a paste formulation are also described which can be administered on their own or can be used as a feed additive for cats and dogs. For example, a composition contained (by weight) glucosamine sulfate 36%, chondroitin sulfate 4%, sodium hyaluronate 0.144%, manganese sulfate 0.144%, ibuprofen 200 mg, powdered sugar 20%, glycerin 0.7%, xanthan qum 0.2%, sodium benzoate 0.7%, citric acid 0.2%, molasses 23.5%, and water 14.4%. 9004-61-9, Hyaluronic acid 9007-28-7, Chondroitin sulfate RL: FFD (Food or feed use); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses) (chondroprotective/restorative compns. containing hyaluronic acid for treatment of joint disorders) L17 ANSWER 15 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN 2001:869012 HCAPLUS ACCESSION NUMBER: 136:11162 DOCUMENT NUMBER: Analgesics combined with naturally-occurring TITLE: chondroprotective agents Hammerly, Milton INVENTOR(S): PATENT ASSIGNEE(S): USA U.S. Pat. Appl. Publ., 5 pp. SOURCE: CODEN: USXXCO DOCUMENT TYPE: Patent LANGUAGE: English FAMILY ACC. NUM. COUNT: 1 PATENT INFORMATION: APPLICATION NO. DATE KIND DATE PATENT NO. ----US 2001046971 A1 20011129 US 6608041 B2 20030819 US 2001-784384 20010215 US 2000-183704P P 20000218 PRIORITY APPLN. INFO.: Pharmaceutical compns. comprise a chondroprotective component and an analgesic component, wherein the chondroprotective component is naturally occurring in a preferred form of the invention, and the analgesic component is acetaminophen or its derivs. or analogs. The invention also provides procedures for administering the compns. to a patient who is afflicted with osteoarthritis. Acetaminophen 400 and chondroitin sulfate 150 g are placed into a mech. mixer and shaken until a homogeneous mixture is obtained. The composition is suitable to be administered to a mammalian subject for the treatment of osteoarthritis by ingestion of 5.5 g

of such a mixture on a daily basis. 7512-17-6, N-Acetyl glucosamine

9004-61-9, Hyaluronan 9007-28-7,

Chondroitin sulfate

ΙT

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (analgesics combined with naturally-occurring chondroprotective agents)

L17 ANSWER 16 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

2001:138996 HCAPLUS ACCESSION NUMBER:

DOCUMENT NUMBER: 134:309144

Water-exchange processes in hyaline cartilage TITLE:

and in its major components in normal and

osteoarthrosis cartilage

Nikolaeva, S. S.; Chhol, Kim Zong; Bykov, V. A.; AUTHOR(S):

Roshina, A. A.; Yakovleva, L. B.; Korolyova, O.

A.; Omelianenko, N. P.; Rebrov, L. B.

Sci. Res. Sch., Methodical Center Biomedical CORPORATE SOURCE:

Technology, Moscow, 123056, Russia

Voprosy Meditsinskoi Khimii (2000), 46(6), SOURCE:

581-590

CODEN: VMDKAM; ISSN: 0042-8809

NII Biomeditsinskoi Khimii PUBLISHER:

DOCUMENT TYPE: Journal LANGUAGE: Russian

The content of different forms of tissue water was studied in the AR normal articular cartilage and osteoarthrosis cartilage and its structural components: collagen, potassium hyaluronate, sodium chondroitin sulfate and its complexes. In the

components of cartilage matrix a few of fractions of bound water different in the strength of binding are present. At the maximal humidity, all water in collagen binds with the active groups of biopolymers and in the glycosaminoglycans, in addition to bound water,

are present, two crystal forms of freezing water (free water) at

least. The quantity of free water in the collagenchondroitin sulfate membrane, is increased with

the increase of chondroitin sulfate. In the

collagen-hyaluronate complex, fraction of free water is found only at the low concentration of potassium hyaluronate. It was shown that in the hyalin cartilage, in different from the other connective tissues (skin, Achilles tendon), the most part of water is free water and its quantity is increased in the osteoarthrosis. It is supposed that the rearrangement of binding and free-water fractions in the

osteoarthrosis is the result of deficiency of

hyaluronic acid and therefore this may be regarded in the improvement of methods of treatment. This scientific and methodical approach allow to receive information on the forms and binding energy of water in the biol. tissues, which is absorbed from fluids and steam phase and determine characters of the pathol. changes.

L17 ANSWER 17 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

2000:450288 HCAPLUS ACCESSION NUMBER:

DOCUMENT NUMBER: 133:290516

Sulfated glycosaminoglycans and TITLE:

glucosamine may synergize in promoting synovial hyaluronic acid synthesis

McCarty, M. F.; Russell, A. L.; Seed, M. P. AUTHOR (S): NutriGuard Research, La Jolla, CA, 92037, USA CORPORATE SOURCE:

> 571-272-2528 Searcher : Shears

Medical Hypotheses (2000), 54(5), 798-802 SOURCE: CODEN: MEHYDY; ISSN: 0306-9877 Churchill Livingstone PUBLISHER: Journal; General Review DOCUMENT TYPE: English LANGUAGE: A review with 48 refs. is given. High-mol.-weight hyaluronic AB acid (HA) produced by the synovium may function physiol. to aid preservation of cartilage structure and prevent arthritic pain; both the size and concentration of HA in synovial fluid are diminished in osteoarthritis (OA). Glucosamine therapy for OA can be expected to increase synovial HA production by providing rate-limiting substrate. In addition, certain sulfated glycosaminoglycans and polysaccharides - including chondroitin sulfate (CS), dermatan sulfate, and pentosan polysulfate - stimulate synovial HA production, apparently owing to a hormone-like effect triggered by the binding of these polymers to membrane proteins of synovial cells. Surprisingly, a proportion of orally administered CS is absorbed as intact polymers - apparently by pinocytosis. These considerations may rationalize clin. studies concluding that oral CS provides slow-onset but durable pain relief and functional improvement in OA. The possibility that oral glucosamine and CS may interact in a complementary or synergistic fashion to improve synovial fluid HA content in OA should be assessed in clin. studies, and the potential of adjunctive CS administration to improve the clin. response achievable with optimal intakes of glucosamine should likewise be evaluated. In light of the fact that the synovium virtually functions as a 'placenta' for cartilage, focusing on synovium as the target for therapeutic intervention in OA may be a rational strategy. 3416-24-8, Glucosamine 9007-28-7, Chondroitin sulfate RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses) (sulfated glycosaminoglycans and glucosamine synergize in promoting synovial hyaluronic acid synthesis) IT 9004-61-9, Hyaluronic acid RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process) (sulfated glycosaminoglycans and glucosamine synergize in promoting synovial hyaluronic acid synthesis) THERE ARE 48 CITED REFERENCES AVAILABLE REFERENCE COUNT: 48 FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT HCAPLUS COPYRIGHT 2004 ACS on STN L17 ANSWER 18 OF 24 1999:807322 HCAPLUS ACCESSION NUMBER: 132:245687 DOCUMENT NUMBER: TITLE: Niacinamide therapy for osteoarthritis - does it inhibit nitric oxide synthase induction by interleukin-1 in chondrocytes? McCarty, M. F.; Russell, A. L. AUTHOR(S): Nutrition 21/AMBI, San Diego, CA, 92037, USA CORPORATE SOURCE: Medical Hypotheses (1999), 53(4), 350-360 SOURCE:

Searcher: Shears 571-272-2528

CODEN: MEHYDY; ISSN: 0306-9877

Churchill Livingstone

PUBLISHER:

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review with 157 refs. Fifty years ago, Kaufman reported that high-dose niacinamide was beneficial in osteoarthritis (OA) and rheumatoid arthritis. A recent double-blind study confirmed the efficacy of niacinamide in OA. It may be feasible to interpret this finding in the context of evidence that synovium-generated interleukin-1 (IL-1), by inducing NO synthase and thereby inhibiting chondrocyte synthesis of aggrecan and type II collagen, is crucial to the pathogenesis of OA. Niacinamide and other inhibitors of ADP ribosylation have been shown to suppress cytokine-mediated induction of NO synthase in a number of types of cells; it is therefore reasonable to speculate that niacinamide will have a comparable effect in IL-1-exposed chondrocytes, blunting the antianabolic impact of IL-1. The chondroprotective antibiotic doxycycline may have a similar mechanism of action. Other nutrients reported to be useful in OA may likewise intervene in the activity or synthesis of IL-1. Supplemental glucosamine can be expected to stimulate synovial synthesis of hyaluronic acid; hyaluronic acid suppresses the anticatabolic effect of IL-1 in chondrocyte cell cultures, and has documented therapeutic efficacy when injected intra-articularly. S-adenosylmethionine (SAM), another proven therapy for OA, upregulates the proteoglycan synthesis of chondrocytes, perhaps because it functions physiol. as a signal of sulfur availability. IL-1 is likely to decrease SAM levels in chondrocytes; supplemental SAM may compensate for this deficit. Adequate Se nutrition may down-regulate cytokine signaling, and ample intakes of fish oil can be expected to decrease synovial IL-1 production; these nutrients should receive further evaluation in OA. These considerations suggest that nontoxic nutritional regimens, by intervening at multiple points in the signal transduction pathways that promote the synthesis and mediate the activity of IL-1, may provide a substantially superior alternative to nonsteroidal anti-inflammatory drugs (merely palliative and often dangerously toxic) in the treatment and perhaps

prevention of OA. REFERENCE COUNT:

157 THERE ARE 157 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L17 ANSWER 19 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER: 1999:9887 HCAPLUS

DOCUMENT NUMBER: 130:71612

TITLE:

Bioresorbable antiadhesion of carboxypolysaccharide polyether

intermacromolecular complexes and methods for

their use in reducing surgical adhesions Schwartz, Herbert E.; Blackmore, John M.

INVENTOR(S):

PATENT ASSIGNEE(S): Fziomed, Inc., USA SOURCE: PCT Int. Appl., 95 pp.

CODEN: PIXXD2

DOCUMENT TYPE:

Patent English

LANGUAGE: En FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO. KIND DATE APPLICATION NO. DATE

```
WO 1998-US10814 19980528
                            19981223
     WO 9858011
                       A1
             AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ,
             DE, DK, EE, ES, FI, GB, GE, HU, IL, IS, JP, KE, KG, KP, KR,
             KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO,
             NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA,
             UG, UZ, VN, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
         RW: GH, GM, KE, LS, MW, SD, SZ, UG, ZW, AT, BE, CH, CY, DE, DK,
             ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
             CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG
                                                             19970617
                            19990525
                                           US 1997-877649
     US 5906997
                       Α
                                           US 1998-23267
                                                             19980213
     US 6017301
                       Α
                            20000125
                                                             19980213
     US 6034140
                       Α
                            20000307
                                           US 1998-23097
                                                             19980528
     AU 9876985
                       A1
                            19990104
                                           AU 1998-76985
                            20021128
     AU 754787
                       B2
                                           EP 1998-924928
                                                             19980528
     EP 1002002
                       A1
                            20000524
             AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC,
             PT, IE, FI
                                           JP 1999-504437
                                                             19980528
                            20020416
     JP 2002511897
                       T2
                                           US 1999-252147
                                                             19990218
     US 6133325
                       Α
                            20001017
                                        US 1997-877649
                                                            19970617
PRIORITY APPLN. INFO.:
                                                         Α
                                        WO 1998-US10814 W
                                                            19980528
     The present invention relates to improved methods for making and
AB
     using bioadhesive, bioresorbable, antiadhesion compns. made of
     intermacromol. complexes of carboxyl-containing polysaccharides and
     polyethers, and to the resulting compns. The polymers are associated
     with each other, and are then either dried or are used as fluids.
     Bioresorbable, bioadhesive, antiadhesion compns. are useful in
     surgery to prevent the formation of post-surgical adhesions. The
     compns. are designed to breakdown in vivo, and thus be removed from
     the body. Membranes are inserted during surgery either dry or
     optionally after conditioning in aqueous solns. The antiadhesion,
     bioadhesive, bioresorptive, antithrombogenic and phys. properties of
     such membranes can be varied as needed by carefully adjusting the pH
     of the polymer casting solns., polysaccharide composition, the polyether
     composition, or by conditioning the membranes prior to surgical use.
     or multi-layered membranes can be made and used to provide further
     control over the phys. and biol. properties of antiadhesion
     membranes. Antiadhesion compns. may also be used to deliver drugs
     to the surgical site and release them locally.
     9004-61-9, Hyaluronic acid 9007-28-7,
IΤ
     Chondroitin sulfate
     RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
        (bioresorbable adhesives containing carboxypolysaccharide-polyether
        intermacromol. complexes)
                         3
                               THERE ARE 3 CITED REFERENCES AVAILABLE FOR
REFERENCE COUNT:
                               THIS RECORD. ALL CITATIONS AVAILABLE IN
                               THE RE FORMAT
                      HCAPLUS COPYRIGHT 2004 ACS on STN
L17 ANSWER 20 OF 24
                         1998:699598 HCAPLUS
ACCESSION NUMBER:
                         130:93516
DOCUMENT NUMBER:
                         Roles of aggrecan, a large chondroitin
TITLE:
                         sulfate proteoglycan, in cartilage
                         structure and function
                         Watanabe, Hideto; Yamada, Yoshihiko; Kimata,
AUTHOR(S):
                         Koji
                         Craniofacial Developmental Biology and
CORPORATE SOURCE:
                         Regeneration Branch, National Institute of
```

Dental Research, National Institutes of Health,

Bethesda, MD, 20892, USA

SOURCE: Journal of Biochemistry (Tokyo) (1998), 124(4),

687-693

CODEN: JOBIAO; ISSN: 0021-924X
Japanese Biochemical Society

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

PUBLISHER:

AB A review with 62 refs. on structure and function of aggrecan and its genetic disorders. Aggrecan, a large aggregating proteoglycan, is one of the major structural components of cartilage. Its core protein contains three globular domains and two glycosaminoglycan-attachment domains. These domains play various roles to maintain cartilage structure and function. An N-terminal globular domain binds hyaluronan and link protein to form huge aggregates. The chondroitin sulfate (CS) chains attach to

the CS domain and provide a hydrated, viscous gel that absorbs compressive load. Two autosomal recessive chondrodysplasias, cartilage matrix deficiency (cmd) in mice and nanomelia in chicken are both caused by aggrecan gene mutations. Cmd homozygotes die shortly after birth, while the heterozygotes are born normal. However, cmd heterozygotes develop late onset of spinal disorder, which suggests aggrecan as a candidate gene predisposing individuals to spinal problems. Nanomelia is a useful model to elucidate intracellular trafficking of proteoglycans. Further studies on aggrecan will lead to prophylaxis and treatment of joint destructive diseases such as osteoarthrosis and to elucidation of cartilage development, which is essential for skeletal formation.

REFERENCE COUNT: 63 THERE ARE 63 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE

IN THE RE FORMAT

L17 ANSWER 21 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER: 1995:862804 HCAPLUS

DOCUMENT NUMBER: 123:305923

TITLE: Biochemical and pharmacokinetic aspects of oral

treatment with chondroitin

sulfate

AUTHOR(S): Conte, A.; Volpi, N.; Palmieri, L.; Bahous, I.;

Ronca, G.

CORPORATE SOURCE: Dep. "Biologia Animale", Univ. Modena, Italy

SOURCE: Arzneimittel-Forschung (1995), 45(8), 918-25

CODEN: ARZNAD; ISSN: 0004-4172

PUBLISHER: Cantor
DOCUMENT TYPE: Journal
LANGUAGE: English

AB Chondroitin sulfate (Condrosulf) was

characterized for structure, physicochem. properties and purity. This glycosaminoglycan has a relative mol. mass of about 14,000 a sulfate-to-carboxyl ratio of 0,95 due to the high percentage of monosulfated disaccharides (38% 6-monosulfate and 55% 4-monosulfate) and a low amount of disulfated disaccharides (1.1%) inside the polysaccharide chains. No other glycosaminoglycans were detected in the preparation Chondroitin sulfate was labeled by reduction with sodium 3H-borohydride and administered by oral route in the rat and dog. More than 80% of radioactivity was absorbed and found in urine and tissues. The plasma radioactivity was

fractionated by size-exclusion chromatog. in three fractions: radioactivity associated with high, intermediate and low mol. mass The peak value of the concentration of high mol. mass radioactivity compds. in plasma was reached after 1.6 and 2.1 h for the rat and dog, resp. After 36 h the high mol. mass radioactivity compds. were still present in plasma of dog and rat. After 24 h radioactivity was higher in the intestine, liver, kidneys, synovial fluid and cartilage than in other tissues. Chondroitin sulfate was orally administered to man (healthy volunteer) in a single daily dose of 0.8 g and in two daily doses of 0.4 g. The results showed that both forms of administration determined a significant increase of plasma concentration of chondroitin sulfate as compared with predose value over a full 24 h period. Elimination constant values and tmax (of the first administration in the case of fractionated dose) were almost the same for the two administrations. Some biochem. parameters (number of leukocytes, proteins, sulfated glycosaminoglycans and hyaluronic acid amts., and N-acetylglucosaminidase activity) of synovial fluid were evaluated in controls and treated osteoarthritic subjects. No variations were observed in the patient who did not receive chondroitin sulfate. Five days of chondroitin sulfate administration led to a significant increase of concentration and mol. mass of hyaluronan and a decrease of a lysosomal enzyme, N-acetyl-glucosaminidase. No significant differences in leukocyte count and protein content were detected. 9007-28-7, Chondroitin sulfate RL: BPR (Biological process); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES

(biochem. and pharmacokinetic aspects of oral treatment with chondroitin sulfate)

L17 ANSWER 22 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER:

1995:364299 HCAPLUS

DOCUMENT NUMBER:

122:115054

TITLE:

IT

Purified natural and synthetic compounds for the

treatment of osteoarthritis

INVENTOR(S):

Lansbury, Peter T., Jr.; Hauschka, Peter V.

PATENT ASSIGNEE(S):
SOURCE:

Neogenix, Inc., USA PCT Int. Appl., 41 pp.

CODEN: PIXXD2

DOCUMENT TYPE:

Patent

LANGUAGE:

English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

PATENT	NO.	KIND	DATE		APPLI	CATION	NO.	DATE		
WO 9428	889	A1	19941222		WO 19	94-US64	90	19940	0608	
W:	AU, BB,	BG, BR	, BY, CA,	CN,	CZ, FI,	GE, HU	, JP,	KG,	KR,	ΚZ,
			, MN, MW,							
	UA, UZ									
RW:	AT, BE,	CH, DE	, DK, ES,	FR,	GB, GR,	IE, IT	, LU,	MC,	NL,	PT,
	SE, BF,	BJ, CF	, CG, CI,	CM,	GA, GN,	ML, MR	, NE	SN,	TD,	TG
AU 9472	058	A1	19950103		AU 19	94-7205	8	19940	0608	
PRIORITY APP	LN. INFO).:			US 1993-	73189		19930	0608	
					WO 1994-	US6490		19940	3608	

The present invention relates to individual, well-defined compds. AB and the uses of these compds., alone or in conjunction with bioactive mols. such as growth factors or metalloproteinase inhibitors, for the repair of cartilage damage as, for example, is found in osteoarthritis. Such well-defined compds. may include purified components of the extracellular matrix, derivs. of extracellular matrix components, and glycosaminoglycan mimics. glycosaminoglycan mimics include chondroitin-4sulfate, chondroitin-6-sulfate, hyaluronic acid, heparin, heparan sulfate, keratan sulfate, dermatan sulfate, poly-N-acetylglucosamine, and poly-Nglucosamine. 9004-61-9, Hyaluronic acid 24967-93-9, Chondroitin-4-sulfate 25322-46-7, Chondroitin-6-sulfate RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (extracellular matrix components for treatment of osteoarthritis) L17 ANSWER 23 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN 1994:48935 HCAPLUS ACCESSION NUMBER: 120:48935 DOCUMENT NUMBER: Novel compositions and methods for detection and TITLE: treatment of human osteoarthritis Sandy, John D.; Flannery, Carl R.; Neame, Peter INVENTOR(S): J.; Lohmander, L. Stefan Shriners Hospitals for Crippled Children, USA PATENT ASSIGNEE(S): SOURCE: PCT Int. Appl., 17 pp. CODEN: PIXXD2 DOCUMENT TYPE: Patent LANGUAGE: English FAMILY ACC. NUM. COUNT: PATENT INFORMATION: APPLICATION NO. DATE PATENT NO. KIND DATE

					,
	WO 9322429	Al 1993	1111	WO 1993-US4029	19930429
	W: CA, JP		•	•	
	RW: AT, BE,	CH, DE, DK,	ES, FR, G	B, GR, IE, IT, LU	J, MC, NL, PT,
	SE				
	US 5427954	A 1995		US 1992-875515	
PRIO	RITY APPLN. INFO			1992-875515	
AB				ctivity is used i	.n the
	detection, trea				
				ere aggrecanase o	
	aggrecan has be	en identifie	d as the b	ond between Glu-3	373 and Ala-374
	and this allows	the design	of inhibit	ors of the aggree	canase (no
	data). Synovia	l fluid from	osteoarth	ritis patients wa	s fractionated
	in CsCl d. grad				
				ding <mark>hyaluronan</mark> a	ind
	link protein, a	nd therefore	lacking t	he G1 domain was	obtained.
	N-terminal anal	. of the cle	avage prod	lucts identified t	he site of
	cleavage.		•		

L17 ANSWER 24 OF 24 HCAPLUS COPYRIGHT 2004 ACS on STN ACCESSION NUMBER: 1985:605876 HCAPLUS

DOCUMENT NUMBER: 103:205876

```
Effects of sodium diclofenac on
TITLE:
                         glycosaminoglycan metabolism in experimental
                         osteoarthritis in rabbits
                         Eronen, Ilkka; Videman, Tapio
AUTHOR(S):
                         Inst. Occup. Health, Univ. Cent. Hosp.,
CORPORATE SOURCE:
                         Helsinki, SF-00170, Finland
                         Scandinavian Journal of Rheumatology (1985),
SOURCE:
                         14(1), 37-42
                         CODEN: SJRHAT; ISSN: 0300-9742
DOCUMENT TYPE:
                         Journal
                         English
LANGUAGE:
                                    [15307-86-5] on the metabolism of
AB
     The effect of diclofenac (DS)
     glycosaminoglycans (GAGs) was studied in rabbits during the
     development of osteoarthritis of the knee induced by immobilization.
     DS did not inhibit in vivo metabolism of sulfated GAGs. Healthy rabbits
     given DS showed only marginal changes of GAG content in joint
     tissues. DS did not prevent the loss of GAGs from the weight-bearing
     cartilages of the immobilized knees, but caused a further loss of
     chondroitin sulfates accompanied by an increased
     amount of hyaluronic acid [9004-61-9] in the
     tissues. DS prevented the accumulation of GAGs, which
     normally occurs during development of osteoarthritis in
     tissues of the tibial margin and in collateral ligaments. Thus, the
     effect of DS on the GAG metabolism in connective tissues is somewhat
     different from that with other nonsteroidal antiinflammatory agents.
ΙT
     3416-24-8 9007-28-7
     RL: BIOL (Biological study)
        (of joint tissues, diclofenac effect on, in osteoarthritis)
IT
     9004-61-9
     RL: PROC (Process)
        (of joint tissues, diclofenac increase of, in osteoarthritis)
     (FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, CONFSCI, SCISEARCH,
     JICST-EPLUS, JAPIO' ENTERED AT 08:54:48 ON 13 FEB 2004)
                                                  "HYALURONIC ACID"/CN
              1 SEA FILE=REGISTRY ABB=ON PLU=ON
L1
              1 SEA FILE=REGISTRY ABB=ON
                                          PLU=ON HEXOSAMINES/CN
L2
                                          PLU=ON
                                                  GLUCOSAMINE/CN
              1 SEA FILE=REGISTRY ABB=ON
L3
              1 SEA FILE=REGISTRY ABB=ON PLU=ON N-ACETYL-D-GLUCOSAMINE/
L4
                CN
              1 SEA FILE=REGISTRY ABB=ON
                                                  N-ACETYL-D-GALACTOSAMIN
                                          PLU=ON
L5
                E/CN
              2 SEA FILE=REGISTRY ABB=ON
                                          PLU=ON
                                                  HEXOSE/CN
L6
              3 SEA FILE=REGISTRY ABB=ON
                                          PLU=ON
                                                  "CHONDROITIN SULFATE"/C
L7
                N OR "CHONDROITIN SULFATE A"/CN OR "CHONDROITIN SULFATE
                C"/CN
              9 SEA FILE=REGISTRY ABB=ON PLU=ON L2 OR L3 OR L4 OR L5
L8
                OR L6 OR L7
          15273 SEA FILE=HCAPLUS ABB=ON PLU=ON L1 OR HYALURONIC OR
L9
                HYALURONAN OR HA (3A) HYALURON?
            659 SEA L9(L) ((OSTEOARTHRIT? OR (OSTEO OR DEGENERAT?) (3A) (ART
L18
                HRIT? OR ARTHROSIS) OR OSTEOARTHROSIS OR DEGENERAT? (3A) (J
                OINT (W) (DISEAS? OR DISORDER))) (S) (TREAT? OR THERAP? OR
                PREVENT?) OR ANTIOSTEOARTHR?)
             75 SEA L18(L)(L8 OR HEXOSAMINE OR GLUCOSAMINE OR CHONDROITIN
L19
                (1W) (SULFATE OR SULPHATE OR SO##) OR N(W) (ACETYL OR
                AC) (1W) (GLUCOSAMINE OR GALACTOSAMINE OR GAL) OR ACETYLGLU
                COSAMINE OR ACETYLGALACTOSAMINE OR HEXOSE)
```

L20 72 L19 NOT L13

PROCESSING COMPLETED FOR L20

L21 40 DUP REM L20 (32 DUPLICATES REMOVED)

L21 ANSWER 1 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER: 2003-671402 [63] WPIDS

DOC. NO. CPI: C2003-183116

TITLE: Sterile, aqueous viscoelastic composition useful in

ophthalmic surgical procedures comprises a combination of hyaluronic acid and chondroitin

sulfate or its salt in a vehicle.

DERWENT CLASS: A96 B04 D22 INVENTOR(S): JAFARI, M R

PATENT ASSIGNEE(S): (ALCO-N) ALCON INC

COUNTRY COUNT: 38

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG

WO 2003057187 A1 20030717 (200363)* EN 21 RW: AT BE BG CH CY CZ DE DK EE ES FI FR GB GR IE IT LU MC NL PT

SE SK TR

W: AU BR CA CN GB JP KP KR MX NZ PH PL RU SG US ZA

APPLICATION DETAILS:

PRIORITY APPLN. INFO: US 2001-342918P 20011221

AN 2003-671402 [63] WPIDS

AB W02003057187 A UPAB: 20031001

NOVELTY - A sterile aqueous viscoelastic composition comprises a combination (w/v.%) of hyaluronic acid (1 - 2) or its salt and chondroitin sulfate (3 - 5, preferably 4) or its salt in a vehicle. The molecular weight of hyaluronic acid and chondroitin sulfate is 1500000 - 1900000 daltons and 20000 - 100000 (preferably 50000 - 90000) daltons respectively.

ACTIVITY - Ophthalmological; Osteopathic; Antiarthritic; Dermatological.

MECHANISM OF ACTION - None given.

USE - In ophthalmic surgical procedures e.g. cataract surgery (claimed). Also useful for the treatment of chondromalacia and osteoarthritis (e.g. grade I and grade II osteoarthritis); in drug delivery (e.g. delivery of anti-fibrotics, antibiotics, steroidal and non-steroidal antiinflammatories, anesthetics, analgesics, and other medicaments or gene therapies to diseased or traumatized tissues), cosmetic surgery and reconstructive surgery; for reducing wrinkles or treating varicose veins; and in post-surgical, arising from tissue fibrosis and adhesions (e.g. in nasal, spinal cord, cardiovascular, orthopedic and orthodontic surgical procedures).

ADVANTAGE - The composition exhibits an improved rheological

profile for certain types of surgery, particularly ophthalmic surgery. The composition permits superior performance in ophthalmic surgery, and in particular in the conventional steps or phases in the surgical removal of cataracts. During the surgical procedure, the composition achieves satisfactory intraoccular space maintenance and ocular tissue protection and the same time permits manipulation of ocular tissues and ease of removal at the end of the procedure. The composition provides a physician with functional benefits without the attendant cost and inconvenience of using multiple products/syringes during a single surgical procedure. Dwg.0/2

L21 ANSWER 2 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER: 2003-468583 [44]

WPIDS

DOC. NO. CPI:

C2003-125104

TITLE:

Use of a mixture of chondroitin sulfate and hyaluronic acid in the manufacture of medicament for repairing or regenerating cartilage in joints

caused by cartilage disease or trauma.

DERWENT CLASS:

INVENTOR(S):

HERMIDA, O E H

PATENT ASSIGNEE(S):

(ALCO-N) ALCON INC

COUNTRY COUNT:

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA

B05

102

WO 2003041724 A1 20030522 (200344)* EN 22

RW: AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR IE IT KE

LS LU MC MW MZ NL OA PT SD SE SK SL SZ TR TZ UG ZM ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ

NO NZ OM PH PL PT RO RU SC SD SE SG SI SK SL TJ TM TN TR TT

TZ UA UG US UZ VC VN YU ZA ZM ZW

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 20030417	24 A1	WO 2002-EP12703	20021113

PRIORITY APPLN. INFO: US 2002-82743 20020222; MX 2001-11542 20011113

AN 2003-468583 [44] WPIDS

WO2003041724 A UPAB: 20030710 AB

NOVELTY - Repair or regeneration of a cartilage caused by cartilage disease or trauma involves intraarticular instillation of a mixture of chondroitin sulfate (a) and hyaluronic acid (b) or its salts.

DETAILED DESCRIPTION - AN INDEPENDENT CLAIM is included for treating joints exhibiting degeneration of articular cartilage involving intraarticular administration of a viscous composition comprising a mixture of (a) and (b) or its salts.

ACTIVITY - Osteopathic; Antiarthritic.

MECHANISM OF ACTION - None given.

USE - The composition is used for repairing or regenerating

cartilage in joints caused by cartilage disease or trauma; and for treating joints of knees, shoulders, sacroiliac, coxofemoral, ankles, elbows, interphalangeal and wrists exhibiting; for the treatment of degeneration of articular cartilage caused by chondromalacia or osteoarthritis of grade I or II in mammals (preferably humans) (claimed).

ADVANTAGE - The composition is stable, sterile, non-pyrogenic, and a viscoelastic solution. The composition has a viscosity of 20000 - 60000 cps and an osmolarity of 300 - 350 mOsmol/kg. The treatment regenerates the articular cartilage destroyed by grade I and II osteoarthritis by up to 94.5% according to the results obtained from a study made on 325 knees and 16 coxofemoral joints.

Dwg.0/6

L21 ANSWER 3 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER:

2003-201368 [19] WPIDS

DOC. NO. CPI:

C2003-051203

TITLE:

Composition, useful for the treatment of arthritic joints, e.g. osteoarthritis, comprises at least one glycosaminoglycan, part of which are encapsulated

in liposome.

DERWENT CLASS:

B04

INVENTOR(S):

NIEMIEC, S; THOMPSON, J

PATENT ASSIGNEE(S):

(DEPU-N) DEPUY

COUNTRY COUNT:

100

PATENT INFORMATION:

PATENT NO	KIND DATE	WEEK	LA	PG

WO 2003000190 A2 20030103 (200319)* EN 28

RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ NL OA PT SD SE SL SZ TR TZ UG ZM ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SI SK SL TJ TM TN TR TT TZ UA UG US UZ VN YU ZA ZM ZW

APPLICATION DETAILS:

PATENT NO KIND	APPLICATION	DATE
WO 2003000190 A2	WO 2002-US19716	20020620

PRIORITY APPLN. INFO: US 2002-386791P 20020607; US 2001-300750P 20010625

AN 2003-201368 [19] WPIDS

AB WO2003000190 A UPAB: 20030320

NOVELTY - A composition (C) useful for the treatment of arthritic joints, comprises at least one glycosaminoglycan, at least part of which are encapsulated in at least one liposome.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included

for:

- (1) Liposomal delivery vehicle (I) which encapsulates one or more glycosaminoglycans; and
 - (2) Method for the treatment of arthritic joints, comprising:

(a) preparing (C); and
 (b) administering (C).
 ACTIVITY - Antiarthritic; Osteopathic.
 No biological data available.
 MECHANISM OF ACTION - None given.
 USE - (C) is useful for the treatment of arthritic joints, e.g.
osteoarthritis (claimed), by preparing (C) and administering (C) in
an appropriate dosage.
Dwg.0/0

ANSWER 4 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

L21 ANSWER 4 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT ON STN ACCESSION NUMBER: 2004-081566 [08] WPIDS CROSS REFERENCE: 1996-309308 [31]; 1997-341293 [31]; 1998-494554 [42]; 1998-567506 [48]; 1999-119663 [10]; 1999-130297 [11]; 2000-339499 [29]; 2000-339500 [29]; 2000-349544 [30]; 2000-350329 [30]; 2000-350330 [30]; 2000-365358 [31]; 2001-182720 [18]; 2001-380485 [40]; 2001-388427 [41]; 2001-556526 [62]: 2002-017246 [02]: 2002-074189

[18]; 2001-380485 [40]; 2001-388427 [41]; 2001-556526 [62]; 2002-017246 [02]; 2002-074189 [10]; 2002-616543 [66]; 2003-379050 [36]; 2003-645129 [61]; 2003-721614 [68]; 2003-851612

[79]; 2004-021100 [02]

DOC. NO. CPI:

TITLE:

C2004-033462

New targeted drug delivery system comprising chondroprotective agents, useful for inhibiting cartilage degradation, specifically for reducing or preventing destruction of articular cartilage in a

joint.

DERWENT CLASS:

A96 B04 B07 D16

INVENTOR(S):

DEMOPULOS, G A; HERZ, J M; PALMER, P P

PATENT ASSIGNEE(S):

(OMER-N) OMEROS CORP

COUNTRY COUNT:

PATENT INFORMATION:

 	 DATE	WEEK	 PG
		(200408)*	 71

APPLICATION DETAILS:

PATENT NO KINE)	APPLICATION	DATE
US 2003235589 A1	Provisional Provisional Provisional CIP of CIP of CIP of CIP of CIP of Provisional	US 1998-105026 US 1998-107256 US 1999-144904 WO 1999-US2462 WO 1999-US2633 WO 2000-US1986 US 2001-839633 US 2002-31546 US 2002-353552 US 2003-356649	P 19981105 P 19990721 5 19991020 0 19991105 4 20000721 20010420 20020118 P 20020201

PRIORITY APPLN. INFO: US 2003-356649 20030131; US 1998-105026P 19981020; US 1998-107256P 19981105; US 1999-144904P 19990721; WO 1999-US24625 19991020; WO 1999-US26330 19991105; WO

2000-US19864 20000721; US 2001-839633 20010420; US 2002-31546 20020118; US 2002-353552P 20020201

AN 2004-081566 [08] WPIDS

CR 1996-309308 [31]; 1997-341293 [31]; 1998-494554 [42]; 1998-567506

[48]; 1999-119663 [10]; 1999-130297 [11]; 2000-339499 [29];

2000-339500 [29]; 2000-349544 [30]; 2000-350329 [30]; 2000-350330

[30]; 2000-365358 [31]; 2001-182720 [18]; 2001-380485 [40];

2001-388427 [41]; 2001-556526 [62]; 2002-017246 [02]; 2002-074189

[10]; 2002-616543 [66]; 2003-379050 [36]; 2003-645129 [61];

2003-721614 [68]; 2003-851612 [79]; 2004-021100 [02]

AB US2003235589 A UPAB: 20040202

NOVELTY - A targeted drug delivery system for the protection of cartilage, comprising chondroprotective agents contained within a delivery vehicle coupled to an antibody or antibody fragment specific to an antigenic determinant localized within the joint, is new. The chondroprotective agents include at least one anabolic chondroprotective agent and at least one inhibitor of cartilage catabolism to inhibit cartilage catabolism and promote cartilage anabolism.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for:

- (1) a targeted composition for the protection of cartilage comprising several chondroprotective agents in a carrier, at least one chondroprotective agent is coupled to an antibody or antibody fragment specific to an antigenic determinant localized within the joint, where the chondroprotective agents include at least one anabolic chondroprotective agent and at least one inhibitor of cartilage catabolism, each being included to inhibit cartilage catabolism and promote cartilage anabolism; and
- (2) protecting cartilage in a patient by delivering a targeted drug delivery system defined above.

ACTIVITY - Osteopathic; Antiarthritic; Antirheumatic; Antiinflammatory; Dermatological; Immunosuppressive.

Experimental protocols are described but no results are given. MECHANISM OF ACTION - Gene Therapy.

USE - The targeted delivery system is useful for inhibiting cartilage degradation, specifically for reducing or preventing destruction of articular cartilage in a joint. It may also be used for treating polyarticular osteoarthritis, (juvenile) rheumatoid arthritis, neuropathic arthropathy, acute rheumatic fever, ochronosis, systemic lupus erythematosus, psoriatic arthritis; ankylosing spondylitis, and other spondyloarthropathies and crystalline arthropathies.

Dwg.0/9

L21 ANSWER 5 OF 40 MEDLINE on STN DUPLICATE 1

ACCESSION NUMBER: 2003612008 IN-PROCESS

DOCUMENT NUMBER: PubMed ID: 14651444

TITLE: Glucosamine: a review of its use in the management of

osteoarthritis.

AUTHOR: Matheson Anna J; Perry Caroline M

CORPORATE SOURCE: Adis International Limited, Auckland, New Zealand.

SOURCE: Drugs & aging, (2003) 20 (14) 1041-60.

Journal code: 9102074. ISSN: 1170-229X.

PUB. COUNTRY: New Zealand

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: IN-PROCESS; NONINDEXED; Priority Journals

ENTRY DATE: Entered STN: 20031230

Last Updated on STN: 20031230

Glucosamine occurs naturally in all human tissues. It AB stimulates the synthesis of glycosaminoglycan, proteoglycan and hyaluronic acid, although the precise mechanism of action remains to be established. Formulated as glucosamine sulphate (Dona) and various others), glucosamine has been evaluated for its efficacy in relieving the symptoms of osteoarthritis and its disease-modifying potential. In two large randomised, double-blind, multicentre studies in patients with osteoarthritis, oral or intramuscular glucosamine for 4-6 weeks was associated with a greater decrease in symptom severity (as assessed by the Lequesne index) than placebo. In addition, there was a greater proportion of responders (defined as patients with a >or=3-point reduction in the Lequesne index, along with a positive overall assessment by the investigator) at the end of the treatment period with glucosamine than with placebo. In two large 4-week trials, oral glucosamine produced similar improvements to ibuprofen in the Lequesne index in one study and in articular pain scores in the other study. In a smaller 8-week comparative trial, oral glucosamine therapy achieved a significantly greater improvement in articular pain score than ibuprofen, and the investigators rated treatment efficacy as 'good' in a significantly greater proportion of glucosamine than ibuprofen recipients. In comparison with piroxicam, glucosamine significantly improved arthritic symptoms after 12 weeks of therapy and remained effective 8 weeks after treatment was discontinued. Beneficial effects of long-term oral glucosamine therapy in preventing joint space narrowing and improving symptoms were shown in two 3-year placebo-controlled trials in a total of 414 patients with osteoarthritis. Statistically significant differences favouring glucosamine were noted in the per-protocol and intention-to-treat analyses for the primary endpoints for both joint structural changes and symptom modification. Glucosamine has a tolerability profile similar to that of placebo and is better tolerated than ibuprofen or piroxicam. In particular, glucosamine recipients had a markedly lower incidence of qastrointestinal disturbances than those receiving ibuprofen. Other adverse events reported in both glucosamine and ibuprofen recipients were pruritus or skin reactions, flushing and fatigue. In general, a lower incidence of withdrawal from clinical trials was reported for glucosamine recipients than either ibuprofen or piroxicam recipients.CONCLUSION: In short-term clinical trials, glucosamine provided effective symptomatic relief for patients with osteoarthritis of the knee. In addition, glucosamine has shown promising results in modifying the progression of arthritis over a 3-year period. Glucosamine may therefore prove to be a useful treatment option for osteoarthritis.

L21 ANSWER 6 OF 40 MEDLINE on STN DUPLICATE 2 ACCESSION NUMBER: 2003416050 MEDLINE

DOCUMENT NUMBER: 22836247 PubMed ID: 12954956

TITLE: Intra-articular therapy in osteoarthritis.

AUTHOR: Uthman I; Raynauld J-P; Haraoui B

CORPORATE SOURCE: Department of Internal Medicine, Faculty of Medicine,

American University of Beirut, Beirut, Lebanon..

iuthman@aub.edu.lb

SOURCE: POSTGRADUATE MEDICAL JOURNAL, (2003 Aug) 79 (934)

449-53. Ref: 78

Journal code: 0234135. ISSN: 0032-5473.

PUB. COUNTRY:

England: United Kingdom

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW LITERATURE)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200311

ENTRY DATE:

Entered STN: 20030905

Last Updated on STN: 20031105

Entered Medline: 20031104

AB The medical literature was reviewed from 1968-2002 using Medline and the key words "intra-articular" and "osteoarthritis" to determine the various intra-articular therapies used in

the treatment of osteoarthritis.

Corticosteroids and hyaluronic acid are the most

frequently used intra-articular therapies in

osteoarthritis. Other intra-articular substances such as orgotein, radiation synovectomy, dextrose prolotherapy, silicone, saline lavage, saline injection without lavage, analgesic agents, non-steroidal anti-inflammatory drugs, glucosamine, somatostatin, sodium pentosan polysulfate, chloroquine,

mucopolysaccharide polysulfuric acid ester, lactic acid solution, and thiotepa cytostatica have been investigated as potentially therapeutic in the treatment of arthritic joints. Despite the lack of strong, convincing, and reproducible evidence that any of the intra-articular therapies significantly alters the

intra-articular therapies significantly alters the progression of osteoarthritis, corticosteroids and hyaluronic acid are widely used in patients who have failed

other therapeutic modalities for lack of efficacy or toxicity. As a practical approach for a knee with effusion, steroid injections should be considered while the presence of symptomatic

"dry" knees may favour the **hyaluronic** acid approach. The virtual absence of serious side effects, coupled with the perceived benefits, make these approaches attractive.

L21 ANSWER 7 OF 40 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN DUPLICATE 3

ACCESSION NUMBER: DOCUMENT NUMBER: 2003:583865 BIOSIS PREV200300585593

TITLE:

Radiological, arthroscopical evaluation and synovial membrane histology of the knee of dogs treated with chondroitin sulphate-sodium hialuronate association after experimental degenerative joint disease.

Original Title: Avaliacao radiologica e artroscopica e histologia da membrana sinovial do joelho de caes tratados com associacao de sulfato de condroitina e

hialuronato de sodio, apos doenca articular degenerativa induzida experimentalmente..

AUTHOR(S):

Arias S., S. A.; Rezende, C. M. F. [Reprint Author];

Melo, E. G.; Nunes, V. A.; Correa, J. C.

CORPORATE SOURCE:

Departamento de Clinica e Cirurgia Veterinaria da Escola de Veterinaria, UFMG, 30123-970, Caixa Postal

567, Belo Horizonte, MG, Brazil

cleuza@dedalus.lcc.ufmg.br

SOURCE: Arquivo Brasileiro de Medicina Veterinaria e

Zootecnia, (Agosto 2003) Vol. 55, No. 4, pp. 421-429.

print.

ISSN: 0102-0935 (ISSN print).

DOCUMENT TYPE:

Article Portuguese

LANGUAGE: ENTRY DATE:

Entered STN: 10 Dec 2003

Last Updated on STN: 10 Dec 2003

AB The aim of this study was the assessment of hyaluronic acid and chondroitin sulphate association in the

therapy of degenerative joint

disease (DJD) in dogs. Ten mongrel dogs underwent arthroscopic section of cruciate cranial ligament aiming the development of DJD. Twenty one days after the procedure, surgical substitution of cruciate cranial ligament was carried out in all animals. Then five animals were treated with the combination of hyaluronic acid and chondroitin sulphate

. The other five dogs were used as controls. Arthroscopical and radiological evaluations of the left fore limb were carried out before arthroscopic section at the some day and 90 days after cruciate cranial ligament substitution. Histologically the effect of the association of hyaluronic acid and chondroitin sulphate was more evident in the synovial membrane that had regeneration of the intimal layer and reduced lympho-plasmocitic infiltrate in the sub-intimal layer. However, the treatment did not prevent DJD cartilage lesions evaluated by arthroscopy and radiology.

L21 ANSWER 8 OF 40 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN

ACCESSION NUMBER:

2003:285754 SCISEARCH

THE GENUINE ARTICLE: BW36V

TITLE:

Various interactions of drugs with cross-linked

hyaluronate gel

AUTHOR:

Yomota C (Reprint); Okada S

CORPORATE SOURCE:

Natl Inst Hlth Sci Osaka, Chuo Ku, Hoenzaka 1-1-43, Osaka 5400006, Japan (Reprint); Natl Inst Hlth Sci

Osaka, Chuo Ku, Osaka 5400006, Japan

COUNTRY OF AUTHOR:

SOURCE:

Japan POLYMER GELS: FUNDAMENTALS AND APPLICATIONS, (MAR

2003) Vol. 833, pp. 326-338.

Publisher: AMER CHEMICAL SOC, 1155 SIXTEENTH ST NW,

WASHINGTON, DC 20036 USA.

ISSN: 0097-6156.

DOCUMENT TYPE:

General Review; Journal

LANGUAGE:

English

REFERENCE COUNT:

18
ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB Hyaluronate(HA) is a biopolymer composed of repeating disaccharide subunits of N-acetyl-D-glucosamine and D-glucuronate. HA is extensively distributed in connective tissue, synovial fluid of joints and in vitreous humor of the eye. It has been extensively used as a therapeutic agent in osteoarthritis and ophthalmic surgery. Thus hyaluronate is one of the natural polymers successfully applicable to the biomedical use. The basic properties of crosslinked HA gel

to the biomedical use. The basic properties of crosslinked HA gel have been reported(I) and there are several reports of applying the HA gel to medical devices (2,3). However it is reported that due to

the high swelling, the ability of the HA gel to retain other substances is not strong enough to use as a pharmaceutical reservoir(2).

Previously we noted the reports that some anionic polymer gels bind cationic surfactants(4,5). We have already reported that dodecyltrimethylammonium bromide(DOTMA) binds HA in solution cooperatively and that the binding constant is much smaller than those of other anionic polysaccharides such as **chondroitin sulfate**(6). Furthermore the crosslinked HA gel was observed to shrink with time in addition of DOTMA, and the weight of the gel decreased by only 2-4% of the initial weight(7). On the other hand, it is well known that many kinds of drugs have properties of surfactants, and self association (micelle) in aqueous solution have been investigated(8-13). Therefore as cationic surfactants, some drugs were expected to cause the shrinking of the HA gel. The interactions of the crosslinked HA gel with several kinds of cationic drugs were investigated, and the release of incorporated substances was measured. (C) 2003 American Chemical Society.

L21 ANSWER 9 OF 40 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on

STN DUPLICATE 4

ACCESSION NUMBER: 2003:523970 BIOSIS DOCUMENT NUMBER: PREV200300526101

TITLE: Drug therapy: Only symptomatic or also causal

treatment?.

Original Title: Medikamentoese Therapie: Nur symptomatische oder auch kausale Behandlung?. Bach, G. L. [Reprint Author]; Foerster, K. K.

AUTHOR(S): Bach, G. L. [Reprint Author]; Foerster, K. K. CORPORATE SOURCE: Innere Medizin/Rheumatologie, Beim Bergtor 12, 67269,

Gruenstadt, Germany GerhardLBach@yahoo.de

SOURCE: Deutsche Zeitschrift fuer Sportmedizin, (Juni 2003)

Vol. 54, No. 6, pp. 199-204. print.

ISSN: 0344-5925 (ISSN print).

DOCUMENT TYPE: Article LANGUAGE: German

ENTRY DATE: Entered STN: 12 Nov 2003

Last Updated on STN: 12 Nov 2003

Osteoarthritis is a degenerative joint disease of the hyalin AB cartilage of synovial joints. Clinically the disease is characterized by joint pain, tenderness, limitation of movement, occasional effusions, and local inflammation of various extent. Therefore, the reduction of inflammation and alleviation of pain are goals of primary conservative treatment. This treatment is purely symptomatic as monotherapy or as a combined treatment involving physical, orthopedic and medical measures. In 1996, increasing interest in a causal drug therapy to osteoarthritis led to the classification of "symptom-modifying" and "structure-modifying" drugs. Pure analgesics, classical non-steroidal anti-inflammatory drugs (NSAIDs) non-selective and COX-2-selective as well-, intraarticular corticosteroids and other pharmacological agents were classified as "symptom-modifying". Glucosamine sulfate and hyaluronic acid also belong to this group. Both substances have been shown to act as "symptom-modifying" agents. In addition studies indicate a clinically relevant "structure-modification" with a potential to inhibit the progress of osteoarthritis over a

Searcher: Shears 571-272-2528

long-term. In the future prospective, randomized studies are needed

to evaluate various kinds of medical treatment for the potential of having symptom- and structure-modifying effect.

L21 ANSWER 10 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN DUPLICATE 5

ACCESSION NUMBER: 2003293984 EMBASE

TITLE: Pharmacologic treatment alternatives.

AUTHOR: Nolte R.M.; Klimkiewicz J.J.

CORPORATE SOURCE: Dr. J.J. Klimkiewicz, Department of Orthopaedic

Surgery, Division of Sports Medicine, Georgetown University Medical Center, Washington, DC, United

States. kajklim@pol.net

SOURCE: Sports Medicine and Arthroscopy Review, (2003) 11/2

(102-106).

Refs: 26

ISSN: 1062-8592 CODEN: SMARCV

COUNTRY: United States

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 031 Arthritis and Rheumatism

033 Orthopedic Surgery

O37 Drug Literature Index O38 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

AB Before consideration of the surgical alternatives for

osteoarthritis, traditional therapy has focused on the symptomatic management of this disease process. Recently, a new conservative alternative has gained popularity in attempting to modify and even reverse the breakdown of articular cartilage in this condition. These disease-modifying agents include the nutricueticals chondroitin and glucosamine sulfate, in addition to the viscosupplements, containing hyaluronic acid. This review acts as updated review on the conservative management of osteoarthritis.

L21 ANSWER 11 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2003392410 EMBASE

TITLE: Management of the arthritic knee in older people.

AUTHOR: Dervin G.F.

CORPORATE SOURCE: Dr. G.F. Dervin, University of Ottawa, Ottawa

Hospital, Orthopaedic Division, Ottawa, Ont., Canada

SOURCE: Geriatrics and Aging, (1 Sep 2003) 6/8 (20-24).

Refs: 29

ISSN: 1488-8408 CODEN: GAEGB5

COUNTRY: Canada

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 020 Gerontology and Geriatrics

027 Biophysics, Bioengineering and Medical

Instrumentation

031 Arthritis and Rheumatism 033 Orthopedic Surgery 037 Drug Literature Index

038 Adverse Reactions Titles

LANGUAGE: English SUMMARY LANGUAGE: English

AB Understanding the options for treatment of

osteoarthritis of the knee will allow physicians to help

their patients realize the physical and social demands of healthy life. Weight loss, physical therapy and unloading braces are clinically proven strategies in the early stages of the disease. Acetaminophen remains the analgesic of choice, while COX-2 NSAIDs are reserved for flare-ups and short-term use. Oral glucosamine and chondroitin sulfate also may be helpful. Persistently swollen knees may respond to aspiration and corticosteroid injection or viscosupplementation with hyaluronic acid derivatives. Those with acute onset of mechanical symptoms may respond to arthroscopic debridement and resection of unstable meniscal tears. Osteotomy of the tibia or femur are options for isolated unicompartmental disease in younger and more active patients. Arthroplasty of one or all compartments of the knee is the definitive procedure for end-stage arthrosis with very dependable results in most clinical settings.

L21 ANSWER 12 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

2002-617109 [66] WPIDS ACCESSION NUMBER:

C2002-174439 DOC. NO. CPI:

Chondroprotective/restorative composition useful TITLE:

for treating or preventing osteoarthritis and other joint diseases in mammals comprises hyaluronic acid

or its salts.

A96 B05 C03 D13 DERWENT CLASS: INVENTOR(S):

PIERCE, S W (PIER-I) PIERCE S W PATENT ASSIGNEE(S):

COUNTRY COUNT:

PATENT INFORMATION:

PG PATENT NO KIND DATE WEEK US 2002068718 A1 20020606 (200266)*

APPLICATION DETAILS:

PATENT NO KIND	APPLICATION	DATE
US 2002068718 Al Provisio		20001003

PRIORITY APPLN. INFO: US 2000-237838P 20001003; US 2001-967977

20011002

2002-617109 [66] AN WPIDS

US2002068718 A UPAB: 20021014 AB

NOVELTY - A chondroprotective/restorative composition comprises hyaluronic acid or its salts and optionally a pharmaceutical carrier.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for:

(1) a method of treating or preventing osteoarthritis, joint effusion, joint inflammation and pain, synovitis, lameness, post operative arthroscopic surgery, deterioration of proper joint function, reduction or inhibition of metabolic activity of chondrocytes, activity of enzymes that degrade cartilage, reduction or inhibition of production of hyaluronic acid in mammals comprises oral administration of hyaluronic acid or its salt;

> Shears 571-272-2528 Searcher :

- (2) an animal feed having chondroprotective/restorative benefits comprising a nutritionally effective feed base selected from grains, proteins, and/or fats, and an hyaluronic acid or its salts; and
- (3) a therapeutic and chondroprotective/restorative composition comprising Hyaluronic acid or its salts, a therapeutic drug, and optionally a pharmaceutical carrier.

ACTIVITY - Osteopathic; Antiarthritic; Anti-inflammatory; Analgesic.

MECHANISM OF ACTION - None given.

USE - Fort treating or preventing osteoarthritis, joint effusion, joint inflammation and pain, synovitis, lameness, post operative arthroscopic surgery, deterioration of proper joint function, reduction or inhibition of metabolic activity of chondrocytes, activity of enzymes that degrade cartilage, reduction or inhibition of production of hyaluronic acid in mammals. Hyaluronic acid, optionally in combination with glucosamine sulfate and/or chondroitin sulfate is useful in chondroprotective/restorative compositions. The composition is

useful in an animal feed comprising a feed base selected from grains, proteins, fats and mixtures of these. The animal feed further includes molasses. The animal feed is in the form of a paste and is a cat, dog or horse feed. Dwq.0/0

L21 ANSWER 13 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER:

2002-427934 [46] WPIDS

DOC. NO. CPI:

C2002-121539

TITLE:

Medicament for treating osteoarthritis by

intraarticular injection, containing plasma as synovial fluid replacement, preferably together with pentosan polysulfate, alpha-tocopherol and

phospholipid.

DERWENT CLASS:

B04

PATENT ASSIGNEE(S):

(KIEF-I) KIEF H

COUNTRY COUNT:

PATENT INFORMATION:

PAT	CENT	NO	KIND	DATE	WEEK	LA	PG
DΕ	1005	4257	A1	20020516	(200246) *		4

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
DE 10054257	A1	DE 2000-10054257	20001102

PRIORITY APPLN. INFO: DE 2000-10054257 20001102

2002-427934 [46] WPIDS AN

DE 10054257 A UPAB: 20020722 AB

NOVELTY - A medicament (I) for intraarticular injection contains body-compatible plasma, recovered from blood after induction of a coagulation process, as replacement for missing synovial fluid.

ACTIVITY - Antiarthritic; Osteopathic; Antiinflammatory. No suitable biological data given.

571-272-2528 Searcher : Shears

MECHANISM OF ACTION - Synovial fluid substitute for stimulating cartilage metabolism.

USE - (A) is useful for treating

osteoarthritis, by replacing the protein component of synovial fluid, stimulating cartilage metabolism (due to the activated oxygen content of the plasma), alleviating proteoglycan (e.g. hyaluronic acid and chondroitin sulfate) deficiency and controlling inflammation.

ADVANTAGE - (I) markedly improves the moveability and reduces the pain in joints affected by osteoarthritis, for a period of months or even years. The combination of lipid- and water-soluble components provides an amphoteric base with a depot effect. (I) is obtainable as a homogeneous, clear solution which is easy to handle and inject into joint cavities.

Dwg.0/1

L21 ANSWER 14 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2002152257 EMBASE

TITLE: Hyaluronan increases glomerular cyclooxygenase-2

protein expression in a p38 MAP-kinase-dependent

process.

AUTHOR: Dunlop M.E.; Muggli E.E.

CORPORATE SOURCE: Dr. M.E. Dunlop, University of Melbourne, Department

of Medicine, Royal Melbourne Hospital, Grattan

Street, Parkville, Vic. 3050, Australia.

medunlop@unimelb.edu.au

SOURCE: Kidney International, (2002) 61/5 (1729-1738).

Refs: 66

ISSN: 0085-2538 CODEN: KDYIA5

COUNTRY: United States
DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 005 General Pathology and Pathological Anatomy

028 Urology and Nephrology

030 Pharmacology

037 Drug Literature Index

LANGUAGE: English SUMMARY LANGUAGE: English

AB Background. Accumulation of the matrix glycosaminoglycan hyaluronan occurs in many types of renal injury but could follow any provision of hyaluronan substrate to the kidney, for example, through widespread use of supplementary glucosamine in osteoarthritic conditions.

Hyaluronan can increase cyclooxygenase-2 (COX-2) protein and prostaglandin production. This effect was characterized in rat renal glomeruli to determine the cellular mechanism of activation. Methods. Isolated glomeruli were treated with purified hyaluronan (molecular mass 2 x 10(5) D) for up to 24 hours.

Results. An increase in cyclooxygenase capacity and COX-2 protein was shown to follow the activation of p38-mitogen-activated protein (MAP) kinase and to be inhibited by a specific pyridinyl imadazole inhibitor (SB 202190). Hyaluronan-induced activation of cytosolic phospholipase A2 also was shown to be a p38 MAP kinase effect in these preparations. Prostaglandin production was inhibited

by COX-2-specific non-steroidal anti-inflammatory compounds (NS-398 and celecoxib) but, as shown for many non-steroidal anti-inflammatory drugs (NSAIDs), an increase in COX-2 protein

anti-inflammatory drugs (NSAIDs), an increase in COX-2 protein accompanied this inhibition. Conclusions. We propose that these

findings have clinical relevance. Prostaglandins have a number of important intrarenal regulatory effects leading to some debate over renal function with the use of NSAIDs. Where hyaluronan is increased, p38 MAP-kinase-dependent provision of prostaglandin substrate, via activation of cytosolic phospholipase A2, and a concomitant increase in cyclooxygenase-2 protein would raise renal prostaglandin levels. While NSAID treatment can prevent a rise in prostaglandin levels, it needs to be maintained to avoid possible exacerbation of pro-inflammatory conditions due to increased COX-2 protein levels.

L21 ANSWER 15 OF 40 MEDLINE on STN DUPLICATE 6

ACCESSION NUMBER: 2002701312 MEDLINE

DOCUMENT NUMBER: 22348633 PubMed ID: 12462019

TITLE: A comparison of the efficacy of conservative

therapies for obese patients with osteoarthritis of

the knee.

AUTHOR: Toda Yoshitaka

CORPORATE SOURCE: Kishoukai Toda Orthopedic Rheumatology Clinic,

Toyotsu-cho, Suita-city.

SOURCE: RYUMACHI, (2002 Oct) 42 (5) 795-800.

Journal code: 0153217. ISSN: 0300-9157.

PUB. COUNTRY: Japan

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: Japanese

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200301

ENTRY DATE: Entered STN: 20021217

Last Updated on STN: 20030123 Entered Medline: 20030122

Two hundred and five obese women with osteoarthritis of AΒ the knee (knee OA) were treated with one of the following interventions for six weeks: A nonsteroidal anti-inflammatory drug (NSAID) alone (Control, n = 16), NSAID combined with walking (n = 16) 16), NSAID with non-weight bearing exercises (n = 16), NSAID with intra-articular hyaluronan injections (NH, n = 16), NSAID with supplement foods, glucosamine and condroitin (NS, n =15), traditional shoe inserts, wedged insoles (NT, n = 20), NSAID with a novel insole with an elastic subtalar strapping (NN, n = 25), an energy restriction diet plus the NSAID (ND, n = 32), a diet combined with the NSAID and exercises (NDE, n = 25), and the diet combined with the NSAID and walking (NDW, n=24). The Lequesne index was employed to obtain remission percentages, which were then compared between the ten groups. Compared with all but the NDW group, the NDE group showed a significant improvement. group also demonstrated a significant improvement, compared with all but the NDE and NN groups. The NN group showed a significant improvement compared with the control, NS and ND groups. However, for patients in the NDE and NDW groups, it was difficult to maintain body composition, even with these intervention methods. In this regard, the use of the insole with the elastic subtalar strapping was a simple and convenient method to maintain the body composition effect of the intervention method for knee OA patients.

L21 ANSWER 16 OF 40 MEDLINE on STN DUPLICATE 7

ACCESSION NUMBER: 2002434287 MEDLINE

DOCUMENT NUMBER: 22178657 PubMed ID: 12192262

TITLE: Oral and intra-articular remedies: Review of papers

published from March 2001 to February 2002.

AUTHOR: Jubb Ronald W

CORPORATE SOURCE: University of Birmingham, Selly Oak Hospital, UK..

Ronald.jubb@uhb.nhs.uk

SOURCE: CURRENT OPINION IN RHEUMATOLOGY, (2002 Sep) 14 (5)

597-602. Ref: 45

Journal code: 9000851. ISSN: 1040-8711.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200301

ENTRY DATE: Entered STN: 20020823

Last Updated on STN: 20030129 Entered Medline: 20030128

AB There have been considerable advances in the drug treatments used to treat osteoarthritis. The development of selective cyclo-oxygenase inhibitors (COX-II) and confirmation of their efficacy and gastrointestinal safety will reduce treatment morbidity in the elderly. Guidelines for safe and appropriate use of COX-II drugs are now available. The role of anti-inflammatory drugs in precipitating cardiorenal events has been highlighted but remains to be fully evaluated. Glucosamine, diacerein, and hyaluronan may all be disease-modifying drugs for osteoarthritis but confirmatory studies are still needed.

L21 ANSWER 17 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN DUPLICATE 8

ACCESSION NUMBER: 2002182693 EMBASE

TITLE: [Intraarticular Hyaluronic acid in osteoarthritis of

the carpometacarpal joint].

INTRA-ARTIKULARE HYALURONSAIURE BEI DER ARTHROSE DES

DAUMENSATTELGELENKS.

AUTHOR: Talke M.

CORPORATE SOURCE: Dr. M. Talke, Arzt fur Orthopadie, Klosterstrasse

34-35, 13581 Berlin, Germany

SOURCE: Aktuelle Rheumatologie, (2002) 27/2 (101-106).

Refs: 14

ISSN: 0341-051X CODEN: AKRHDB

COUNTRY: Germany

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 020 Gerontology and Geriatrics 031 Arthritis and Rheumatism

037 Drug Literature Index

LANGUAGE: German

SUMMARY LANGUAGE: English; German

AB Osteoarthritis (OA) of the carpometacarpal (CMC) joint is a very common problem in elderly patients. In a survey, 30% out of 25000 patients suffering from OA reported problems located in the CMC joint while, in an epidemiological study, 53% of women between 75 and 79 years of age showed signs of OA of the CMC joint. Pain and degeneration of joint structures may adversely affect joint function and the quality of life in such patients. Current conservative treatment includes physiotherapy followed by the topical and oral administration of analgesics and non-steroidal antirheumatic drugs and intra-articular (i.a.) glucocorticoids respectively. This

is the first report on the safety and efficacy of i.a. exogenous Hyaluronic acid (HA) in patients with OA of the CMC joint. Endogenous HA, a biopolymer made up of repeating sequences of N-acetylglucosamine and glucuronic acid, plays a crucial role in the structure, function and pathology of synovial joints: HA forms part of the cartilage matrix. It also coats the surface of the cartilage and the synovial membrane and confers viscoelasticity to the synovial fluid. In OA, the quality and quantity of endogenous HA in the joint is reduced and numerous clinical studies have shown the therapeutic value of using exogenous HA in OA of bigger joints, such as the knee joint. Twenty patients suffering from severe pain due to radiologically ascertained OA of the CMC joint, were included in an open, prospective clinical study. Treatment consisted of two to three i.a. injections of 10 mg/1 ml HA, obtained by fermentation (Ostenil mini, a presentation specifically developed for treatment of smaller joints), which were administered at weekly intervals. The efficacy parameters were pain, assessed using a Huskisson Visual Analogue Scale (VAS), grip strength (pulp pinch and lateral pinch) assessed using an intrinsicmeter, joint mobility, crepitation during passive movement of the joint and the global clinical impression of investigator and patients. Safety was assessed by the documentation of clinically evident adverse events. The time sequence of the assessments, with a final evaluation of all patients three months after the end of the i.a. treatment, allowed to differentiate between the "immediate" effects and the "carry over" effects of i.a. HA. A marked reduction of pain (from 63.95 ± 11.06 to 39.30 ± 13.24 mm VAS, -38.55%) and an increase in grip strength (pulp pinch: 1.48 ± 0.52 to $2.09 \pm$ 0.90 grades, \pm 37.84%; lateral pinch: 2.10 \pm 0.74 to 2.87 \pm 1.01 grades, 36.67%) was observed when the pre-treatment values were compared to those obtained at the end of the observation period. These differences reached statistical significance (p < 0.001, Friedman test). Crepitation persisted in only three out of eleven patients while joint mobility on radial and palmar abduction also showed a marked improvement. In 19 out of the 20 cases, the investigator and patients were satisfied with the improvements in signs and symptoms achieved in this study. Considering that no adverse effects were reported, the benefit-risk-evaluation favours the use of i.a. HA in this indication. It can be concluded that i.a. HA is a promising new option in the treatment of OA of the CMC joint. The findings of this study should be confirmed in controlled clinical studies with a longer observation period.

L21 ANSWER 18 OF 40 MEDLINE ON STN ACCESSION NUMBER: 2002101869 MEDLINE

DOCUMENT NUMBER: 21820886 PubMed ID: 11833521

TITLE: Meeting the therapeutic challenge of the patient with

osteoarthritis.

AUTHOR: Todd Cathryn

CORPORATE SOURCE: Rocky Mountain Poison Control and Drug Consultation

Center, Denver, Colo, USA.. scarab@rmi.net

SOURCE: JOURNAL OF THE AMERICAN PHARMACEUTICAL ASSOCIATION,

(2002 Jan-Feb) 42 (1) 74-82. Ref: 90

Journal code: 9601004. ISSN: 1086-5802.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200203

ENTRY DATE:

Entered STN: 20020209

Last Updated on STN: 20020315

Entered Medline: 20020314

OBJECTIVE: To discuss the diagnosis of osteoarthritis and AB the efficacy of available pharmacologic and nonpharmacologic treatment options. DATA SOURCES: Published reports on the diagnosis and treatment of osteoarthritis were identified through a MEDLINE search of English-language journal articles using a focused title search for the keywords acetaminophen, nonsteroidal anti-inflammatory, COX-2 nonsteroidal, opioids, capsaicin, tramadol, glucosamine, hyaluronic acid, and osteoarthritis and by reviewing the bibliographies of selected reviews. The American College of Rheumatology (ACR) guidelines, as updated in September 2000, for the treatment of osteoarthritis of the

hip and knee were analyzed with appropriate references to clinical and scientific studies, review articles, and other published guidelines. DATA SYNTHESIS: Each patient's medical history and level of pain should decide the most appropriate treatment. Nonpharmacologic therapies should always be included in the treatment regimen. If further pain management is required, the most appropriate pharmacologic treatments are acetaminophen or nonsteroidal anti-inflammatory drugs for mild-to-moderate pain, tramadol or opioid combinations for moderate-to-moderately severe pain, and opioids for severe pain. Adjunctive treatments,

intraarticular injections, and surgery are also viable options for some patients. CONCLUSION: If used properly, the ACR guidelines for the treatment of osteoarthritis are important

tools in the care of the patient with this disease.

L21 ANSWER 19 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER:

2001183943 EMBASE

TITLE:

Effects of high molecular weight hyaluronan on the

distribution and movement of proteoglycan around

chondrocytes cultured in alginate beads.

AUTHOR:

Kikuchi T.; Yamada H.; Fujikawa K.

CORPORATE SOURCE:

H. Yamada, Department of Orthopaedic Surgery, Fujita Health University, Second Hospital, 3-6-10 Otobashi,

Nakagawaku, Nagoya 454-8509, Japan.

hayamada@fujita-hu.ac.jp

SOURCE:

Osteoarthritis and Cartilage, (2001) 9/4 (351-356).

Refs: 31

ISSN: 1063-4584 CODEN: OSCAEO

COUNTRY:

United Kingdom

DOCUMENT TYPE:

Journal; Article

FILE SEGMENT:

Anatomy, Anthropology, Embryology and 001

Histology

Arthritis and Rheumatism 031

LANGUAGE:

English

SUMMARY LANGUAGE:

English

Objective: To evaluate the effects of high molecular weight

hyaluronan (HA) on the distribution and movement

of proteoglycan (PG) formed around rabbit chondrocytes cultured in

Shears 571-272-2528 Searcher :

alginate beads. Design: Rooster comb-derived HA (MW 8x10(5) Da) was co-polymerized in alginate gel to study the direct effects of extrinsic HA on chondrocytes. PG metabolism of rabbit chondrocytes cultured in alginate beads was examined by measuring the incorporation of [(35)S]sulfate into glycosaminoglycan in two distinct regions, the cells with their cell-associated matrix (CM) and the further-removed matrix (FRM). Immunohistochemical analysis was performed using monoclonal antibodies against chondroitin sulfate and keratan sulfate. Autoradiography using degenerated cartilage tissue from the rabbit osteoarthritis (OA) model was performed to discover the effect of HA on the distribution of newly-synthesized PG in the cartilage tissue. Results: The incorporation of [(35)S]sulfate into newly-synthesized PG in the cells with CM decreased with the addition of 0.125-1.0 mg/ml HA, while the incorporation in the FRM increased. These effects of HA on the distribution of newly-synthesized PG were the same either in chondrocytes with CM or chondrocytes without CM. Immunohistochemical analysis showed that staining of PG in the CM was decreased and staining in the FRM was increased in the HA treated group compared to the control group. Autoradiography using degenerated cartilage tissue from the rabbit OA model indicated that [(35)S]-labeled macromolecules showed a more diffuse distribution in the HA treated group compared with the control group. Conclusion: These results indicate that extrinsic HA could affect the movement of newly-synthesized PG from the CM to the FRM in both alginate beads and cartilage tissue. .COPYRGT. 2001 OsteoArthritis Research Society International.

L21 ANSWER 20 OF 40 MEDLINE on STN DUPLICATE 9

ACCESSION NUMBER:

2002069912 MEDLINE

DOCUMENT NUMBER:

21653857 PubMed ID: 11795556

TITLE:

Pharmacological therapies for the treatment of

osteoarthritis.

AUTHOR:

McColl G J

CORPORATE SOURCE:

Centre for Rheumatic Diseases, Royal Melbourne

Hospital, Parkville, VIC..

g.mccoll@medicine.unimelb.edu.au

SOURCE:

MEDICAL JOURNAL OF AUSTRALIA, (2001 Nov 19) 175 Suppl

S108-11. Ref: 30

Journal code: 0400714. ISSN: 0025-729X.

PUB. COUNTRY:

Australia

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE:

English

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200202

ENTRY DATE:

Entered STN: 20020125

Last Updated on STN: 20020202 Entered Medline: 20020201

AB Non-pharmacological interventions are the first-line therapy for osteoarthritis. If non-pharmacological therapy fails, paracetamol (up to 4 g daily) should be added. If paracetamol fails, the patient's risk factors for gastrointestinal and renal disease should be assessed. In patients with gastrointestinal risk factors, a COX-2-specific inhibitor (CSI) would be used in preference to a conventional non-steroidal anti-inflammatory drug

(NSAID). In patients with renal risk factors, NSAIDs and CSIs should be used with care. In patients who continue to have problems, other treatments should be considered; these might include intra-articular hyaluronan or depot corticosteroid, analgesia or glucosamine.

L21 ANSWER 21 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER: 2001-061650 [07] WPIDS

DOC. NO. CPI: C2001-017150

TITLE: Herbal compositions comprising glucosamine and

Tripterygium wilfordii, Ligustrum lucidum and/or Erycibe schmidtii, for treating inflammation or degeneration of joint tissues, e.g. arthritis.

DERWENT CLASS: B04 C03 D13

INVENTOR(S): BABISH, J G; YU, H; ZHONG, S

PATENT ASSIGNEE(S): (OXFO-N) OXFORD NATURAL PROD PLC

COUNTRY COUNT: 94

PATENT INFORMATION:

PATENT NO KIND DATE WEEK LA PG

WO 2000074696 A1 20001214 (200107)* EN 20

RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC

MW MZ NL OA PT SD SE SL SZ TZ UG ZW

W: AE AG AL AM AT AU AZ BA BB BG BR BY CA CH CN CR CU CZ DE DK DM DZ EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ PL

PT RO RU SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW

AU 2000052310 A 20001228 (200119)

EP 1185281 A1 20020313 (200225) EN

R: AL AT BE CH CY DE DK ES FI FR GB GR IE IT LI LT LU LV MC MK NL PT RO SE SI

GB 2367492 A 20020410 (200232)

APPLICATION DETAILS:

PAT	TENT NO K	IND	APE	PLICATION	DATE
WO	2000074696	A1	WO	2000-GB2092	20000601
ΑU	2000052310	A	ΑU	2000-52310	20000601
ΕP	1185281	A1	EΡ	2000-937014	20000601
		•	WO	2000-GB2092	20000601
GB	2367492	A	WO	2000-GB2092	20000601
	•		GB	2001-31054	20011228

FILING DETAILS:

PAT	CENT NO	KIND	· 		PAT	ENT NO
AU	20000523	10 A	Based	on	WO	2000074696
EΡ	1185281	A1	Based	on	WO	2000074696
GB	2367492	Α	Based	on	WO	2000074696

PRIORITY APPLN. INFO: US 1999-153977P 19990914; US 1999-137172P 19990602

AN 2001-061650 [07] WPIDS

AB WO 200074696 A UPAB: 20011129

NOVELTY - Herbal composition comprising **glucosamine** and at least one herb which is Tripterygium wilfordii, Ligustrum lucidum or Erycibe schmidtii, is new.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is also included for a food product comprising the composition.

ACTIVITY - Antiinflammatory; osteopathic; antiarthritic; antirheumatic.

Tablets were prepared comprising 21 mg/kg glucosamine, 1.5 mg/kg Tripterygium wilfordii extract (0.1 weight% triptolide), 5.0 mg/kg Ligustrum lucidum extract (45% oleanolic acid) and 6.5 mg/kg Erycibe schmidtii extract (0.35% scopoletin) with tabletting excipients. In a clinical study carried out on dogs, the tablet dosage form was administered daily to a group of dogs (1 tablet/day) suffering from arthritis. Preliminary observations, by a veterinarian after 7-10 days indicated that there was an improvement in each animal's condition.

MECHANISM OF ACTION - Enhances synthesis of gucosaminoglycans and hyaluronic acid.

USE - For treating inflammation or degeneration of joint tissues, e.g. arthritis, particularly rheumatoid arthritis or osteoarthritis. The composition may be formulated as a dietary supplement or pharmaceutical or veterinary composition (e.g. for treating dogs, cats, horses or cattle).

Glucosamine diminishes tissue destruction, Tripterygium wilfordii inhibits expression of cyclooxygenase-2 (COX-2) mRNA, Ligustrum lucidum inhibits COX-2 enzyme activity and Erycibe schmidtii can inhibit inflammation and relieve pain.

ADVANTAGE - The composition is suitable for reducing inflammatory responses without having harmful side effects. Combining glucosamine with the Chinese herbs provides improved treatment of pain and inflammation not possible with glucosamine alone and reduces the need to use steroidal antiinflammatory drugs which can cause damage to the gastrointestinal system over extended periods of time. Dwg.0/1

L21 ANSWER 22 OF 40 MEDLINE on STN DUPLICATE 10

ACCESSION NUMBER: 2000318851 MEDLINE

DOCUMENT NUMBER: 20318851 PubMed ID: 10859690

TITLE: Sulfated glycosaminoglycans and glucosamine may

synergize in promoting synovial hyaluronic acid

synthesis.

AUTHOR: McCarty M F; Russell A L; Seed M P

CORPORATE SOURCE: NutriGuard Research, La Jolla, CA, USA.

SOURCE: MEDICAL HYPOTHESES, (2000 May) 54 (5) 798-802.

Journal code: 7505668. ISSN: 0306-9877.

PUB. COUNTRY: SCOTLAND: United Kingdom

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200007

ENTRY DATE: Entered STN: 20000728

Last Updated on STN: 20000728 Entered Medline: 20000720

AB High-molecular-weight hyaluronic acid (HA) produced by the synovium may function physiologically to aid

preservation of cartilage structure and prevent arthritic pain; both the size and concentration of HA in synovial fluid are

diminished in osteoarthritis (OA). Glucosamine therapy for OA can be expected to increase synovial HA production by providing rate-limiting substrate. In addition, certain sulfated glycosaminoglycans and polysaccharides - including chondroitin sulfate (CS), dermatan sulfate, and pentosan polysulfate - stimulate synovial HA production, apparently owing to a hormone-like effect triggered by the binding of these polymers to membrane proteins of synovial cells. Surprisingly, a significant proportion of orally administered CS is absorbed as intact polymers - apparently by pinocytosis. These considerations may rationalize clinical studies concluding that oral CS provides slow-onset but durable pain relief and functional improvement in OA. The possibility that oral glucosamine and CS may interact in a complementary or synergistic fashion to improve synovial fluid HA content in OA should be assessed in clinical studies, and the potential of adjunctive CS administration to improve the clinical response achievable with optimal intakes of glucosamine should likewise be evaluated. In light of the fact that the synovium virtually functions as a 'placenta' for cartilage, focusing on synovium as the target for therapeutic intervention in OA may be a rational strategy. Copyright 2000 Harcourt Publishers Ltd.

DUPLICATE 11 L21 ANSWER 23 OF 40 MEDLINE on STN

ACCESSION NUMBER:

2001204747 MEDLINE

DOCUMENT NUMBER:

PubMed ID: 11234282 21129938

TITLE:

[Water-exchange processes in hyaline cartilage and

its basic components in a normal state and in

osteoarthritisl.

Vlagoobmennye protsessy v gialinovom khriashche i ego

osnovnykh komponentakh v norme i osteoartroze.

AUTHOR:

Nikolaeva S S; Chkhol K Z; Bykov V A; Roshchina A A; Iakovleva L V; Koroleva O A; Omel'ianenko N P; Rebrov

L B

CORPORATE SOURCE:

Scientific Research and School-methodical Center for Biomedical Technology, 123056 Moscow, Krasina str. 2.

SOURCE:

VOPROSY MEDITSINSKOI KHIMII, (2000 Nov-Dec) 46 (6)

581-90.

Journal code: 0416601. ISSN: 0042-8809.

PUB. COUNTRY:

Russia: Russian Federation

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE:

Russian

FILE SEGMENT:

Priority Journals

ENTRY MONTH:

200104

ENTRY DATE:

Entered STN: 20010417

Last Updated on STN: 20010417 Entered Medline: 20010412

The content of different forms of tissue water was studied in the AB normal articular cartilage and osteoarthrosis cartilage and its structural components: collagen, potassium hyaluronate, sodium chondroitinsulphate and its complexes. In the components of cartilage matrix a few of fractions of bound water different in the strength of binding are present. At the maximal humidity, all water in collagen binds with the active groups of biopolymers and in the glycosaminoglycans, in addition to bound water, are present, two crystal forms of freezing water (free water) at least. The quantity of free water in the collagen-chondroitin sulphat membrane, is increased with the increase of chondroitin

> 571-272-2528 Searcher : Shears

sulphate. In the collagen-hyaluronate complex, fraction of free water is found only at the low concentration of hyaluronate kalium. It was shown that in the hyalin cartilage, in different from the other connective tissue (skin, achilles tendon), the most part of water is free water and its quantity is increased in the osteoarthrosis. It is supposed that the rearrangement of binding and free-water fractions in the osteoarthrosis is the result of deficiency of hyaluronic acid and therefore this may be regarded in the improvement of methods of treatment This scientific and methodical approach allow to receive information on the forms and binding energy of water in the biological tissues, which is absorbed from fluids and steam phase and determine characters of the pathological changes.

L21 ANSWER 24 OF 40 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN

2000:596539 SCISEARCH ACCESSION NUMBER:

THE GENUINE ARTICLE: 339VG

Chondroprotective agents in the treatment of TITLE:

articular cartilage degeneration

AUTHOR: Tomford W W (Reprint)

MASSACHUSETTS GEN HOSP, DEPT ORTHOPAED SURG, 55 CORPORATE SOURCE:

FRUIT ST, BOSTON, MA 02114 (Reprint)

COUNTRY OF AUTHOR: USA

OPERATIVE TECHNIQUES IN SPORTS MEDICINE, (APR 2000) SOURCE:

Vol. 8, No. 2, pp. 120-121.

Publisher: W B SAUNDERS CO, INDEPENDENCE SQUARE WEST CURTIS CENTER, STE 300, PHILADELPHIA, PA 19106-3399.

ISSN: 1060-1872. Article; Journal

DOCUMENT TYPE: English LANGUAGE:

cartilage damage.

REFERENCE COUNT:

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

Glucosamine, chondroitin. sulfate, AB and hyaluronic acid provide new and exciting treatments for osteoarthritis. Although the use of these drugs is still controversial, they have gained popularity among the lay public, suggesting that they may have beneficial effects. Studies are now being performed to test the effectiveness of these medicines and, in particular, whether they function simply as placebos. Knowledge of these treatments is important for orthopedists treating young patients with articular

L21 ANSWER 25 OF 40 MEDLINE on STN ACCESSION NUMBER: 2001502142 MEDLINE

21436910 PubMed ID: 11552610 DOCUMENT NUMBER:

[News in the treatment of rheumatic diseases]. TITLE:

Novosti u lijecenju reumatskih bolesti.

AUTHOR: Babic-Naglic D

Klinika za reumatske bolesti i rehabilitaciju CORPORATE SOURCE:

Medicinskoga fakulteta Sveucilista u Zagrebu KBC

Zagreb, Zagreb.

REUMATIZAM, (2000) 47 (2) 20-4. Ref: 37 SOURCE:

Journal code: 0216650. ISSN: 0374-1338.

PUB. COUNTRY: Croatia

Journal; Article; (JOURNAL ARTICLE) DOCUMENT TYPE:

General Review; (REVIEW)

(REVIEW LITERATURE)

571-272-2528 Searcher : Shears

LANGUAGE:
FILE SEGMENT:

Serbo-Croatian Priority Journals

ENTRY MONTH:

200109

ENTRY DATE:

Entered STN: 20010913

Last Updated on STN: 20011001

Entered Medline: 20010927

AB Rheumatic diseases are frustrating issue for the rheumatologists because ethiologic remedy is still missing and much more, they are great socio-economic burden for patients and society. In the last 10 years there was bustling endeavour in creating new products with exact known action. This article deal the new options to treat rheumatoid arthritis with leflunomide, infliximab, etanercept and anakinra and osteoarthritis with hyaluronan, diacerhein, glucosamino sulphate, chondroitin sulphate and avocado/soya unsaponifiables. In particular patients all mentioned products have their place in the treatment plan but critical risk-benefit assessment is needed.

L21 ANSWER 26 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN DUPLICATE 12

ACCESSION NUMBER:

1999395042 EMBASE

TITLE:

Niacinamide therapy for osteoarthritis - Does it

inhibit nitric oxide synthase induction by

interleukin-1 in chondrocytes?.

AUTHOR:

SOURCE:

McCarty M.F.; Russell A.L.

CORPORATE SOURCE:

Dr. M.F. McCarty, NutriGuard Research, 1051 Hermes

Avenue, Encinitas, CA 92024, United States Medical Hypotheses, (1999) 53/4 (350-360).

Refs: 157

ISSN: 0306-9877 CODEN: MEHYDY

COUNTRY:

United Kingdom

DOCUMENT TYPE: Jo

Journal; General Review

FILE SEGMENT: 030 Pharmacology 031 Arthritis and

O31 Arthritis and Rheumatism
O37 Drug Literature Index

LANGUAGE: English SUMMARY LANGUAGE: English

Fifty years ago, Kaufman reported that high-dose niacinamide was beneficial in osteoarthritis (OA) and rheumatoid arthritis. A recent double-blind study confirms the efficacy of niacinamide in OA. It may be feasible to interpret this finding in the context of evidence that synovium-generated interleukin-1 (IL-1), by inducing nitric oxide (NO) synthase and thereby inhibiting chondrocyte synthesis of aggrecan and type II collagen, is crucial to the pathogenesis of OA. Niacinamide and other inhibitors of ADP-ribosylation have been shown to suppress cytokine-mediated induction of NO synthase in a number of types of cells; it is therefore reasonable to speculate that niacinamide will have a comparable effect in IL-1-exposed chondrocytes, blunting the anti-anabolic impact of IL-1. The chondroprotective antibiotic doxycycline may have a similar mechanism of action. Other nutrients reported to be useful in OA may likewise intervene in the activity or synthesis of IL-1. Supplemental glucosamine can be expected to stimulate synovial synthesis of hyaluronic acid; hyaluronic acid suppresses the anti-catabolic effect of IL-1 in chondrocyte cell cultures, and has documented therapeutic efficacy when injected intra-articularly.

S-adenosylmethionine (SAM), another proven therapy for OA, upregulates the proteoglycan synthesis of chondrocytes, perhaps because it functions physiologically as a signal of sulfur availability. IL-1 is likely to decrease SAM levels in chondrocytes; supplemental SAM may compensate for this deficit. Adequate selenium nutrition may down-regulate cytokine signaling, and ample intakes of fish oil can be expected to decrease synovial IL-1 production; these nutrients should receive further evaluation in OA. These considerations suggest that non-toxic nutritional regimens, by intervening at multiple points in the signal transduction pathways that promote the synthesis and mediate the activity of IL-1, may provide a substantially superior alternative to NSAIDs (merely palliative and often dangerously toxic) in the treatment and perhaps prevention of OA.

L21 ANSWER 27 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN DUPLICATE 13

ACCESSION NUMBER: 1999317699 EMBASE

TITLE: [The pharmacological basis of therapeutics in

osteoarthritis].

PHARMAKOLOGISCHE GRUNDLAGEN DER ARTHROSETHERAPIE.

AUTHOR: Steinmeyer J.

CORPORATE SOURCE: Dr. J. Steinmeyer, Orthopadische Klinik, Med. Zentrum

Orthopadie/Phys. Med., Justus-Liebig-Universitat Giessen, Paul-Mcimberg-Str. 3, D-35385 Giessen,

Germany

SOURCE: Medizinische Welt, (1999) 50/8 (341-347).

Refs: 55

ISSN: 0025-8512 CODEN: MEWEAC

COUNTRY: Germany

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 033 Orthopedic Surgery

037 Drug Literature Index

LANGUAGE: German

SUMMARY LANGUAGE: English; German

This review summarizes current information about the pharmacological basis for the therapy of osteoarthritis. In addition, the mode of action of the SYSADOAs (SYmptomatic Slow Acting Drugs in OsteoArthritis) ademethionine, Dglucosamine sulfate, hyaluronic acid and oxaceprole obtained from preclinical and clinical studies are described. Until now the therapy of osteoarthritis still concentrates primarily on the relief of symptoms associated with this disease. At present no evidence has been provided showing that any drug including the SYSADOAs is able to inhibit, decelerate or even reverse morphologically definable cartilage defects in human clinical studies. An analysis of pharmacological results from in vitro and animal experiments reveal that there is still a significant need for more preclinical investigations designed to show whether, and to what extent, the SYSADOAs at clinically relevant concentrations act against the pathogenetically important processes occurring in osteoarthritic articular cartilage. Clinical and preclinical studies, however, justify the statement that these agents are clinically effective concerning their abilities as 'SYmptomatic Slow Acting Drugs in OsteoArthritis'.

L21 ANSWER 28 OF 40 MEDLINE on STN DUPLICATE 14

ACCESSION NUMBER: 1999316135 MEDLINE

DOCUMENT NUMBER: 99316135 PubMed ID: 10383484

TITLE: Glucosamine sulfate.

AUTHOR: Anonymous

SOURCE: ALTERNATIVE MEDICINE REVIEW, (1999 Jun) 4 (3) 193-5.

Journal code: 9705340. ISSN: 1089-5159.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Consumer Health

ENTRY MONTH: 199908

ENTRY DATE: Entered STN: 19990827

Last Updated on STN: 19990827 Entered Medline: 19990817

AB Glucosamine sulfate's role in halting or reversing joint degeneration appears to be directly due to its ability to act as an essential substrate for, and to stimulate the biosynthesis of, the glycosaminoglycans and the hyaluronic acid backbone needed for the formation of the proteoglycans found in the structural matrix of joints. Successful treatment of osteoarthritis must effectively control pain and should slow down or reverse the progression of the degeneration. Biochemical and pharmacological data combined with animal and human studies demonstrate that glucosamine sulfate is capable of

L21 ANSWER 29 OF 40 MEDLINE on STN DUPLICATE 15

ACCESSION NUMBER: 1998429582 MEDLINE

satisfying both of these criteria.

DOCUMENT NUMBER: 98429582 PubMed ID: 9756610

TITLE: Roles of aggrecan, a large chondroitin sulfate

proteoglycan, in cartilage structure and function.

AUTHOR: Watanabe H; Yamada Y; Kimata K

CORPORATE SOURCE: Craniofacial Developmental Biology and Regeneration

Branch, National Institute of Dental Research, National Institutes of Health, Bethesda MD 20892,

USA.. watanabe@yoda.nidr.nih.gov

SOURCE: JOURNAL OF BIOCHEMISTRY, (1998 Oct) 124 (4) 687-93.

Ref: 62

Journal code: 0376600. ISSN: 0021-924X.

PUB. COUNTRY: Japan

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199901

ENTRY DATE: Entered STN: 19990202

Last Updated on STN: 19990202 Entered Medline: 19990121

AB Aggrecan, a large aggregating proteoglycan, is one of the major structural components of cartilage. Its core protein contains three glubular domains and two glycosaminoglycan-attachment domains. These domains play various roles to maintain cartilage structure and function. An N-terminal globular domain binds hyaluronan and link protein to form huge aggregates. The chondroitin sulfate (CS) chains attach to the CS domain and provide a hydrated, viscous gel that absorbs compressive load. Two autosomal recessive chondrodysplasias, cartilage matrix deficiency (cmd) in

mice and nanomelia in chicken are both caused by aggrecan gene mutations. Cmd homozygotes die shortly after birth, while the heterozygotes are born normal. However, cmd heterozygotes develop late onset of spinal disorder, which suggests aggrecan as a candidate gene predisposing individuals to spinal problems. Nanomelia is a useful model to elucidate intracellular trafficking of proteoglycans. Further studies on aggrecan will lead to prophylaxis and treatment of joint destructive diseases such as osteoarthrosis and to elucidation of cartilage development, which is essential for skeletal formation.

L21 ANSWER 30 OF 40 JICST-EPlus COPYRIGHT 2004 JST on STN

ACCESSION NUMBER: 990261056 JICST-EPlus

TITLE: Relationship Between Joint Markers in Synovial Fluid

and Radiographic Findings in Osteoarthritis of the

Knee.

AUTHOR: IKEDA K; KATOH Y; ITOH T

TOYOSHIMA H

CORPORATE SOURCE: Tokyo Women's Medical Coll.

Komakidai Clinic

SOURCE: Nippon Riumachi, Kansetsu Geka Gakkai Zasshi

(Japanese Journal of Rheumatism and Joint Surgery), (1998) vol. 17, no. 3, pp. 171-178. Journal Code:

Y0692A (Fig. 3, Tbl. 2, Ref. 25)

ISSN: 0287-3214

PUB. COUNTRY: Japan

DOCUMENT TYPE: Journal; Article

LANGUAGE: English STATUS: New

AB Early diagnosis and treatment can prevent the progression of joint disease, so appropriate examinations are needed that can recognize subtle cartilage degeneration at an early stage and evaluate treatment efficacy. In 58 patients with osteoarthritis(OA) of the knee, several joint markers were investigated to determine the correlations between their levels and radiographic findings. The levels of chondroitin 6-sulfate(C6S), chondroitin 4-sulfate (C4S), and type II procollagen C-peptide(pCOL II-C) were high in the

(C4S), and type II procollagen C-peptide (pCOL II-C) were high in the patients, but the C6S/C4S ratio and the hyaluronic acid(HA) concentration were low compared with the levels in normal controls. A negative correlation was found between radiographic progression and both the C6S level and the C6S/C4S ratio, while a positive correlation was found between radiographic progression and the pCOL II-C level. These results suggest that joint markers, especially C6S, the C6S/C4S ratio, and pCOL II-C, reflect damage to articular cartilage, and that measurement of these markers in joint fluid may be useful for the diagnosis and monitoring of early OA without radiographic abnormalities. Moreover, these parameters could possibly be applied to evaluation of therapeutic efficacy. (author abst.)

L21 ANSWER 31 OF 40 MEDLINE on STN ACCESSION NUMBER: 1998262758 MEDLINE

DOCUMENT NUMBER: 98262758 PubMed ID: 9600024

TITLE: The role of glucosamine sulfate and chondroitin

sulfates in the treatment of degenerative joint

disease.

AUTHOR: Kelly G S

SOURCE: ALTERNATIVE MEDICINE REVIEW, (1998 Feb) 3 (1) 27-39.

Ref: 34

Journal code: 9705340. ISSN: 1089-5159.

PUB. COUNTRY:

United States

DOCUMENT TYPE:

Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE:

English

FILE SEGMENT:

Consumer Health

ENTRY MONTH:

199806

ENTRY DATE:

Entered STN: 19980618

Last Updated on STN: 19980618 Entered Medline: 19980605

Successful treatment of osteoarthritis must AB effectively control pain, and should slow down or reverse progression of the disease. Biochemical and pharmacological data combined with animal and human studies demonstrate glucosamine sulfate is capable of satisfying these criteria. Glucosamine sulfate's primary biological role in halting or reversing joint degeneration appears to be directly due to its ability to act as an essential substrate for, and to stimulate the biosynthesis of, the glycosaminoglycans and the hyaluronic acid backbone needed for the formation of proteoglycans found in the structural matrix of joints. Chondroitin sulfates , whether they are absorbed intact or broken into their constituent components, similarly provide additional substrates for the formation of a healthy joint matrix. Evidence also supports the oral administration of chondroitin sulfates for joint disease, both as an agent to slowly reduce symptoms and to reduce the need for non-steroidal anti-inflammatory drugs. The combined use of glucosamine sulfate and chondroitin sulfates in the treatment of degenerative joint disease has become an extremely popular supplementation protocol in arthritic conditions of the joints. Although glucosamine sulfate and chondroitin sulfates are often administered together, there is no information available to demonstrate the combination produces better results than glucosamine sulfate alone.

L21 ANSWER 32 OF 40 WPIDS COPYRIGHT 2004 THOMSON DERWENT on STN

ACCESSION NUMBER:

1997-310614 [28] WPIDS

DOC. NO. CPI:

C1997-099986

TITLE:

Enzymatic synthesis of hyaluronic acid from UDP derivatives - with regeneration of starting materials from released UDP to reduce feedback inhibition of hyaluronic acid synthase and increase

yield.

DERWENT CLASS:

B04 D16

INVENTOR(S):

DELUCA, C; WONG, C

PATENT ASSIGNEE(S):

(SCRI) SCRIPPS RES INST

COUNTRY COUNT:

3

PATENT INFORMATION:

APPLICATION DETAILS:

PATENT NO KIND APPLICATION DATE

WO 9720061 A1 WO 1995-US15600 19951130

PRIORITY APPLN. INFO: WO 1995-US15600 19951130

AN 1997-310614 [28] WPIDS

AB WO 9720061 A UPAB: 19970709

An improved method for the enzymatic synthesis of hyaluronic acid (HA) using HA synthase (HAS) to polymerise uridine diphosphate (UDP)-D-glucuronic acid (UDP-GlcA) and UDP-N-acetyl-D-glucosamine (UDP-GlcNAc) with release of UDP, where the improvement is the simultaneous regeneration of both starting materials from the UDP released, and where the released UDP reduces feedback inhibition of the HAS and thereby enhances the yield of HA.

USE - HA is known for viscosity supplementation in ophthalmic surgery and is used for the **treatment** of **osteoarthritis**.

ADVANTAGE - Reusing the UDP released reduces feedback inhibition of HAS and improves yield of HA. HA of molecular weight about 0.55 million is produced in quantities greater then 30 mg. Dwg.0/14

L21 ANSWER 33 OF 40 JICST-EPlus COPYRIGHT 2004 JST on STN

ACCESSION NUMBER:

960946775 JICST-EPlus

TITLE:

Intra-articular injection therapy of MR-20S

(ulinastatin) for osteoarthritis of the knee joint:

Effect on joint markers.

AUTHOR:

SAMURA ATSUYOSHI; YAMADA HARUMOTO; YOSHIHARA YASUO; KOBAYASHI TATSUO; KIKUCHI TOSHIYUKI; TANAKA OSAMU

CORPORATE SOURCE:

SOURCE:

Natl. Def. Med. Coll.

Ensho (Japanese Journal of Inflammation), (1996) vol.

16, no. 5, pp. 357-361. Journal Code: Y0899A (Tbl. 2,

Ref. 19)

CODEN: ENSHEE; ISSN: 0389-4290

PUB. COUNTRY:

Japan

DOCUMENT TYPE:

Journal; Article

LANGUAGE:

Japanese

STATUS:

New

Intra-articular injections of MR-20S (ulinastatin, urinary trypsin AB inhibitor) were performed for 16 knee joints of 16 patients (6 males, 10 females, average age 65.1±8.2) with osteoarthritis (OA). Levels of 7 joint markers in the synovial fluids were measured before and after injection therapy. Levels of chondroitin 4-sulfate (C-4S), 6-sulfate (C-6S) and hyaluronic acid(HA) were measured using HPLC. Levels of type II procollagen C-peptide (pCOL II-C), MMP-3, TIMP-1 and PMN elastase were measured by EIA Levels of pCOL II-C increased significantly after injections (p<0.01). In the patients with C-4S levels of .GEQ.15 nmol/ml or C-6S levels of .GEQ.40 nmol/ml before injection, these chondroitin isomers decreased significantly(p<0.01). No significant changes of HA, MMP-3, TIMP-1 and PMN elastase levels were observed after injection. The present . data suggested that intra-articular injection of MR-20S might affect

the metabolism of cartilage and synovium in OA. (author abst.)

L21 ANSWER 34 OF 40 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on

DUPLICATE 16 STN

1995:498372 BIOSIS ACCESSION NUMBER: PREV199598521922 DOCUMENT NUMBER:

Biochemical and pharmacokinetic aspects of oral TITLE:

treatment with chondroitin sulfate:

Conte, A.; Volpi, N. [Reprint author]; Palmieri, L.; AUTHOR(S):

Bahous, I.; Ronca, G.

Dep. "Biologia Animale", Via Berengario 14, I-41100 CORPORATE SOURCE:

Modena, Italy

Arzneimittel-Forschung, (1995) Vol. 45, No. 8, pp. SOURCE:

918-925.

CODEN: ARZNAD. ISSN: 0004-4172.

DOCUMENT TYPE: Article LANGUAGE: English

Entered STN: 29 Nov 1995 ENTRY DATE:

Last Updated on STN: 29 Nov 1995

AB Chondroitin sulfate (Condrosulf) was characterized for structure, physicochemical properties and purity.

This glycosaminoglycan has a relative molecular mass of about 14,000, a sulfate-to-carboxyl ratio of 0,95 due to the high percentage of monosulfated disaccharides (38% 6-monosulfate and 55% 4-monosulfate) and a low amount of disulfated disaccharides (1.1%) inside the polysaccharide chains. No other glycosaminoglycans were detected in the preparation. Chondroitin sulfate was labelled by reduction with sodium 3H-borohydride and administered by oral route in the rat and dog. More than 70% of radioactivity was absorbed and found in urine and tissues. The plasma radioactivity was fractionated by size-exclusion chromatography in three fractions: radioactivity associated with high, intermediate and low molecular mass compounds. The peak value of the concentration of high molecular mass radioactivity compounds in plasma was reached after 1.6 and 2.1 h for the rat and dog, respectively. After 36 h the high molecular mass radioactivity compounds were still present in plasma of dog and rat. After 24 h radioactivity was higher in the intestine, liver kidneys, synovial fluid and cartilage than in other tissues. Chondroitin sulfate was orally administered to man (healthy volunteer) in a single daily dose of 0.8 g and in two daily doses of 0.4 g. The results showed that both forms of, administration determined a significant increase of plasma concentration of chondroitin sulfate as compared with predose value over a full 24 h period. Elimination constant values and t-max (of the first administration in the case of fractionated dose) were almost the same for the two administrations. Some biochemical parameters (number of leukocytes, proteins, sulfated glycosaminoglycans and hyaluronic acid amounts, and N-acetylglucosaminidase activity) of synovial fluid were evaluated in controls and treated osteoarthritic subjects. No variations were observed in the patient who did not receive chondroitin sulfate. Five days of chondroitin sulfate administration led to a significant increase of concentration and molecular mass of hyaluronan and a decrease of a lysosomal enzyme, N-acetylglucosaminidase. No significant differences in

> 571-272-2528 Searcher : Shears

leukocyte count and protein content were detected.

L21 ANSWER 35 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS

RESERVED. on STN

ACCESSION NUMBER: 94212411 EMBASE

DOCUMENT NUMBER: 1994212411

TITLE: Intra-articular hyaluronic acid in osteoarthritis of

the knee: An investigation into mechanisms of action.

AUTHOR: Creamer P.; Sharif M.; George E.; Meadows K.;

Cushnaghan J.; Shinmei M.; Dieppe P.

CORPORATE SOURCE: Univ. of Bristol Rheumatology Unit, Bristol Royal

Infirmary, Bristol BS2 8HW, United Kingdom

SOURCE: Osteoarthritis and Cartilage, (1994) 2/2 (133-140).

ISSN: 1063-4584 CODEN: OSCAEO

COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 014 Radiology

020 Gerontology and Geriatrics 031 Arthritis and Rheumatism 033 Orthopedic Surgery

037 Drug Literature Index

LANGUAGE: English SUMMARY LANGUAGE: English

AB The objective of this study was to investigate mechanisms of action

of intra-articular hyaluronic acid in

osteoarthritis (OA) of the knee. Twelve patients with

bilateral knee OA and synovial effusions entered a randomized, single-blind, blind observer study. Hyaluronic acid

('Hyalgan', Fidia SpA, Italy) or placebo were given by intra-articular injection weekly for 5 weeks. Assessments included clinical indices and imaging (magnetic resonance imaging (MRI) and 99m Tc bone scanning) before and after the course of injections. In

addition, synovial fluid keratan sulfate (KS), chondroitin sulfate (CS) and C-propeptide of type II collagen (CPII)

were measured. MRI and 99m Tc scanning showed no change in either

treated or placebo knees over the 6-week study period. A fall in KS levels occurred in treated knees compared with

placebo (Wilcoxon paired test, P = 0.1), although this did not reach significance perhaps due to small sample numbers). Ten out of 12

treated knees showed a fall in KS, compared with four out of 12 placebo knees. CS and CPII levels did not change significantly.

Intra-articular injection of hyaluronic acid did not

result in any improvement in the clinical indices compared to the placebo. In conclusion, assessment of cartilage markers may be of value when studying novel therapies in OA. MRI appearances

remain remarkably stable over a 5-week period.

L21 ANSWER 36 OF 40 MEDLINE on STN DUPLICATE 17

ACCESSION NUMBER: 93230761 MEDLINE

DOCUMENT NUMBER: 93230761 PubMed ID: 8472428

TITLE: Pharmacologic and clinical aspects of intraarticular

injection of hyaluronate.

AUTHOR: Iwata H

CORPORATE SOURCE: Department of Orthopaedic Surgery, Nagoya University

School of Medicine, Japan.

SOURCE: CLINICAL ORTHOPAEDICS AND RELATED RESEARCH, (1993

Apr) (289) 285-91. Ref: 60

Journal code: 0075674. ISSN: 0009-921X.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW) (REVIEW LITERATURE)

LANGUAGE: English

Abridged Index Medicus Journals; Priority Journals FILE SEGMENT:

ENTRY MONTH: 199305

Entered STN: 19930604 ENTRY DATE:

Last Updated on STN: 19930604 Entered Medline: 19930520

Hyaluronate (HA) is linear unbranched AΒ polysaccharide consisting of repeating disaccharide units of (1-4)-D-glucuronic acid-beta-(1-3)-D-N-acetylglucosamine. Extensive research has been conducted on HA, a major component of connective tissue. Hyaluronate, molecular weight 80 x 10(4)d, is available for the intraarticular injective treatment of osteoarthrosis of the knee and periarthritis of the shoulder. Hyaluronate relieves pain and has metabolic effects on articular cartilage, synovial tissue, and synovial fluid. Hyaluronate is a safe and effective treatment for patients with osteoarthrosis of the knee and periarthritis of the shoulder.

L21 ANSWER 37 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS

RESERVED. on STN

ACCESSION NUMBER: 87231937 EMBASE

DOCUMENT NUMBER: 1987231937

Combination of glycosaminoglycan and acetylsalicylic TITLE:

acid in knee osteoarthrosis.

Kerzberg E.M.; Roldan E.J.A.; Castelli G.; Huberman AUTHOR:

E.D.

Department of Medicine, Division 'C', J.M. Ramos CORPORATE SOURCE:

Mejia Hospital, Buenos Aires, Argentina

Scandinavian Journal of Rheumatology, (1987) 16/5 SOURCE:

(377-380).

ISSN: 0300-9742 CODEN: SJRHAT

COUNTRY: Sweden DOCUMENT TYPE: Journal

Arthritis and Rheumatism 031 FILE SEGMENT:

> 037 Drug Literature Index

English LANGUAGE:

AR The initial biochemical alteration in osteoarthrosis appears to be a reduction of the proteoglycan content of the articular cartilage, due to a greatly increased catabolism. The administration of exogenous glycosaminoglycans (GAG), the non-proteic moiety of the proteoglycan molecule, inhibits the enzymic degradation of both proteoglycans and collagen. There is clinical evidence that some GAG, such as chondroitin sulphates (long chains of hyaluronic acids linked to N-acetylgalactosamides sulphated in C4 and C6 position) improve the symptom picture in patients with osteoarthrosis. So far, no serious adverse effects due to the prolonged administration

of GAG in man have been reported. We are investigating the clinical action of GAG associated with a standard treatment with acetylsalicylic acid (aas) in patients with osteoarthrosis of the knee joint, to study its possible synergistic effect.

L21 ANSWER 38 OF 40 MEDLINE on STN

DUPLICATE 18

85218584 ACCESSION NUMBER: MEDLINE

DOCUMENT NUMBER: 85218584 PubMed ID: 4001876

> 571-272-2528 Searcher : Shears

TITLE: Effects of sodium diclofenac on glycosaminoglycan

metabolism in experimental osteoarthritis in rabbits.

AUTHOR: Eronen I; Videman T

SOURCE: SCANDINAVIAN JOURNAL OF RHEUMATOLOGY, (1985) 14 (1)

37-42.

Journal code: 0321213. ISSN: 0300-9742.

Report No.: NASA-85218584.

PUB. COUNTRY:

Sweden

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals; Space Life Sciences

ENTRY MONTH: 198507

ENTRY DATE: Entered STN: 19900320

Last Updated on STN: 19900320 Entered Medline: 19850703

The effect of diclofenac sodium (DS) on the metabolism of AB glycosaminoglycans (GAG) was studied in rabbits during the development of osteoarthritis of the knee induced by immobilization. Contents of hexosamines, uronic acid and sulphate-derived 35S-radioactivity in separated GAGs were determined. DS was given to 6 immobilized rabbits for 17 days at a dose of 1.5 mg/kg through a stomach tube. The controls consisted of 8 immobilized rabbits without medication and of 21 non-immobilized rabbits, 6 of which received DS for 17 days. DS did not inhibit in vivo metabolism of sulphated GAGs, according to measurements of [35S]-sulphate incorporation. Healthy rabbits given DS showed only marginal changes of GAG content in joint tissues. DS did not prevent the loss of GAG from the weight-bearing cartilages of the immobilized knees, but caused a further loss of chondroitin sulphates accompanied by an increased amount of hyaluronic acid in the tissues. DS prevented accumulation of the GAGs, which normally occurs during development of osteoarthritis in tissues of the tibial margin and in collateral ligaments. The findings indicate that the effect of DS on the GAG metabolism in connective tissues is somewhat different from that with other non-steroidal anti-inflammatory agents.

L21 ANSWER 39 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 83001411 EMBASE

DOCUMENT NUMBER: 1983001411

TITLE: Biosynthesis of proteoglycan in vitro by cartilage

from human osteochondrophytic spurs.

AUTHOR: Malemud C.J.; Goldberg V.M.; Moskowitz R.W.; et al.

CORPORATE SOURCE: Cartilage Res. Lab., Dep. Med., Div. Rheumatol., Case

West. Reserve Univ., Cleveland, OH 44106, United

States

SOURCE: Biochemical Journal, (1982) 206/2 (329-341).

CODEN: BIJOAK

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal

FILE SEGMENT: 029 Clinical Biochemistry

LANGUAGE: English

AB Proteoglycan biosynthesis by human osteochondrophytic spurs (osteophytes) obtained from osteoarthritic femoral heads at the time of surgical joint replacement was studied under defined culture conditions in vitro. Osteophytes were primarily present in two anatomic locations, marginal and epi-articular. Minced tissue

slices were incubated in the presence of [35S]sulphate or [14C] glucosamine. Osteophytes incorporated both labelled precursors into proteoglycan, which was subsequently characterized by CsCl-isopycnic-density-gradient ultracentrifugation and chromatography on Sepharose CL-2B. The material extracted with 0.5 M-guanidinium chloride showed 78.1% of [35S] sulphate in the Al fraction after centrifugation. Only 23.0% of the [35S] sulphate in this Al fraction was eluted in the void volume of Sepharose CL-2B under associative conditions. About 60-80% of the [35S] sulphate in the tissue 4 M-guanidinium chloride extract was associated with monomeric proteoglycan (fraction D1). The average partition coefficient (K(av)) of the proteoglycan monomer on Sepharose CL-2B was 0.28-0.33. Approx. 12.4% of this monomer formed stable aggregates with high-molecular-weight hyaluronic acid in vitro. Sepharose CL-2B chromatography of fractions with lower buoyant densities (fractions D2-D4) demonstrated elution profiles on Sepharose CL-2B substantially different than that of fraction D1, indicative of the polydisperse nature of the newly synthesized proteoglycan. Analysis of the composition and chain size of the glycosaminoglycans showed the following: preferential elution of both [35S] sulphate and [14C] glucosamine in the 0.5 M-LiCl fraction on DEAE-cellulose; the predominant sulphated glycosaminoglycan was chondroitin 6-sulphate (60-70%), with 9-11% keratan sulphate in the monomer proteoglycan; K(av), values of 0.38 on Sephadex G-200 and 0.48 on Sepharose CL-6B were obtained with papain-digested and NaBH4-treated D1 monomer respectively. A comparison of the synthetic with endogenous glycosaminoglycans indicated similar types. These studies indicated that human osteophytes synthesized in vitro sulphated proteoglycans with some characteristics similar to those of mature human articular cartilage, notably in the size of their proteoglycan monomer and predominance of chondroitin 6-sulphate. They differed from articular cartilage primarily in the lack of substantial quantities of keratan sulphate and aggregation properties associated with monomer interaction with hyaluronic acid.

L21 ANSWER 40 OF 40 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 80239656 EMBASE

DOCUMENT NUMBER: 1980239656

TITLE: Dibutyryl cyclic AMP affects hyaluronate synthesis

and macromolecular organization in normal adult

articular cartilage in vitro.

AUTHOR: Stack M.T.; Brandt K.D.

CORPORATE SOURCE: Rheumatol. Div., Indiana Univ. Sch. Med.,

Indianapolis, Ind. 46223, United States

SOURCE: Biochimica et Biophysica Acta, (1980) 631/2

(264-277).
CODEN: BBACAQ

COUNTRY: Netherlands

DOCUMENT TYPE: Journal

FILE SEGMENT: 029 Clinical Biochemistry

LANGUAGE: English

AB When normal adult dog articular cartilage was cultured in the presence of dibutyryl cyclic AMP a higher proportion than normal of newly synthesized 35S-labeled glycosaminoglycans was released from the tissue into the culture medium, although their net synthesis was

not affected. In conjunction with this release of sulfated glycosaminoglycans, 24 times more [3H]glucosamine-labeled hyaluronic acid was released from the cartilage into the medium, and net hyaluronate synthesis was enhanced 3-fold. Virtually all of the newly synthesized hyaluronic acid in the medium was associated with proteoglycans. The proteoglycans in the medium of the dibutyryl cyclic AMP treated cultures were normal in hydrodynamic size and interacted normally with hyaluronic acid to form large aggregates. These results suggest that the increase in hyaluronate synthesis caused by dibutyryl cyclic AMP may have destabilized the interaction of proteoglycans with the collagen meshwork of the cartilage. The changes seen in normal adult articular cartilage after incubation with dibutyryl cyclic AMP, therefore, are similar to those which are observed in cartilage of osteo-arthritic joints.

(TILE 'MEDLINE' ENTERED AT 08:59:41 ON 13 FEB 2004)

- L22 275 SEA FILE=MEDLINE ABB=ON PLU=ON (HYALURONIC ACID AND OSTEOARTHRITIS)/CT
- L23 21 SEA FILE=MEDLINE ABB=ON PLU=ON L22 AND (HEXOSAMINES OR HEXOSES OR CHONDROITIN SULFATES)/CT
- L24 2 SEA FILE=MEDLINE ABB=ON PLU=ON L23 AND (THERAPY OR THERAPEUTIC USE)/CT
- L24 ANSWER 1 OF 2 MEDLINE on STN
- AN 2001237407 MEDLINE
- TI The increasing need for nonoperative treatment of patients with osteoarthritis.
- AU Buckwalter J A; Stanish W D; Rosier R N; Schenck R C Jr; Dennis D A; Coutts R D
- SO CLINICAL ORTHOPAEDICS AND RELATED RESEARCH, (2001 Apr) (385) 36-45. Ref: 91
 - Journal code: 0075674. ISSN: 0009-921X.
- Osteoarthritis affects more patients than almost any other AB musculoskeletal disorder. The number of patients suffering joint pain and stiffness as a result of this disease will increase rapidly in the next decade. Although operative treatments of patients with osteoarthritis will continue to improve and the number of operative procedures will increase slightly in the next decade, only a small fraction of the patients with osteoarthritis will require operative procedures. The most pressing healthcare need for the majority of patients with osteoarthritis is nonoperative care that helps relieve symptoms and improve function, and in some instances slows progression. In rare instances, the symptoms of osteoarthritis improve spontaneously, but most patients need nonoperative care for decades. Orthopaedists need to improve their ability to provide nonoperative care for patients with osteoarthritis. They should be skilled in the early diagnosis of osteoarthritis and in the use of current common nonoperative treatments including patient education, activity modification, shoe modifications, braces, oral analgesics, oral nonsteroidal antiinflammatory medications, oral dietary supplements, and intraarticular injections. Furthermore, orthopaedists should be prepared to incorporate new nonoperative treatments for patients with osteoarthritis into their practice.
- L24 ANSWER 2 OF 2 MEDLINE on STN
- AN 1999136440 MEDLINE
- TI Will we be able to repair osteoarthritic joints? New drugs and

surgical techniques for cartilage problems.

- AU Almekinders L C
- SO NORTH CAROLINA MEDICAL JOURNAL, (1999 Jan-Feb) 60 (1) 46-8. Journal code: 2984805R. ISSN: 0029-2559.

FILE 'HOME' ENTERED AT 09:00:49 ON 13 FEB 2004